

Children and Young People Select Committee Supplementary Agenda

Tuesday, 30 January 2018
7.00 pm, Committee Room 1
Civic Suite
Lewisham Town Hall
London SE6 4RU

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This meeting is an open meeting and all items on the agenda may be audio recorded and/or filmed.

Part 1

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8.	Children's Social Care Roadmap	F_PRO

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Children and Young People's Select Committee 30th January 2018

CAMHS Update

1. Background Information - National and local CAMHS context

- 1.1 The children's mental health agenda has, for many good reasons, risen up the national agenda. It is perceived that there is increased prevalence of mental health problems among young people and a drive to improve treatment and early intervention.
- 1.2 The national policy document 'Future in Mind' 2015 placed more emphasis on early intervention, resilience and prevention, alongside improved access to services, supporting vulnerable groups and the need for ongoing workforce development. More recently a Green Paper has been published with similar themes.
- 1.3 These themes are very much in line with the Council's stated strategic priorities, in particular Lewisham's Children and Young People Plan (CYPP) 2015-18, the SEL Sustainability Transformation Plan and Lewisham's CYP Mental Health & Emotional Wellbeing Strategy which sets out the vision and priorities for young people's mental health provision across the borough up to 2020 and is aligned to the national policy context.
- 1.4 Over the last 3 years extensive work has been undertaken with stakeholders, including children, young people and their parents, to gain a more informed understanding of what is required in the borough to meet the mental health needs of under 18s. Underpinned by the Mental Health and Emotional Wellbeing Strategy, a considerable amount of work has been undertaken to improve the mental health and wellbeing of Lewisham children and young people.
- 1.5 Stakeholders, including children, young people and their parents have worked together to develop a shared vision and common language, this mirrors the drive to improve access to emotional and mental health support in community settings:

"Our children and young people will be emotionally resilient, knowing when and where to go for help and support when faced with challenges and adversities as they arise. Those that require mental health support are able to access this, where and when they need it.

Our parents/carers and young people's workforce will be equipped to identify and respond to low levels of emotional well-being amongst our young people."

2. Current provision in Lewisham

- 2.1. Lewisham CAMHS (excluding inpatient and some outpatient services) is commissioned by the CYP Joint Commissioning team on behalf of both NHS Lewisham Clinical Commissioning Group (CCG) and Lewisham Council. Services are delivered by South London & Maudsley (SLAM) NHS Foundation Trust.
- 2.2 Specialist CAMHS support is available to all children and young people up to the age of 18 (up to 21 for care leavers), where significant mental health concerns have been identified. The CAMHS service is delivered through five core teams: SYMBOL (a special

service for CYP in the care system), Horizon (Generic CAMHS cases), ARTs (forensic), Neuro-Development (CYP with LD/ASD) and LYPS (CYP with enduring mental health concerns).

- 2.3 Through additional NHS investment, local partners have developed other means of support, such as: an online counselling service; the Young People's Health and Wellbeing Service and the Children's Well-Being Practitioner programme, which are all available to young people with lower level mental health concerns and do not meet a CAMHS threshold.

3. How Lewisham CAMHS is funded

- 3.1 CAMHS in Lewisham, as elsewhere in SE London (and across London more widely) , is funded by the LA and the CCG, with the statutory role for the core funding of CAMHS sitting with the CCG. The total CAMHS funding for 17/18 in Lewisham is £4,300,000. This has risen since 2014/15, when the funding was £3,800,000 and is a reflection of the additional NHS investment as a result of the Five Year Forward View For Mental Health.
- 3.2 The local authority (LA) investment into the CAMHS contract compares well to neighbouring boroughs. Lewisham CAMHS has an LA allocation of £940k for 17/18, which compares to a LA investment of £650k in Lambeth, £443k in Bexley, £1,084,000 in Greenwich and £1,446,000 in Southwark.

4. Savings

- 4.1. The savings proposals put forward to, and agreed by, Mayor and Cabinet in 2016 were part of the wider Lewisham Council savings proposals to meet the £45m of savings to be delivered by 2019/20, in addition to the savings of over £120m already achieved since 2010. In the period 2010 to 16, no savings were made from the local authority contribution to CAMHS.
- 4.2. LA savings for CAMHS were agreed by Mayor and Cabinet in September 2016 and are being phased over a 3 year period 2017/18, 2018/19, 2019/20, which total £244k
- Yr 1 (17/18) savings totalled £94k (merging of two teams / £50k reduction in LAC (SYMBOL) team);
 - Yr 2 (18/19) savings will seek £50k reduction; and
 - Yr 3 (19/20) savings will seek a £100k reduction

- 4.3 The full savings proposals that went to Mayor and Cabinet can be found here:
<http://councilmeetings.lewisham.gov.uk/documents/s45581/Appendices%20i%20to%20vi%20savings%20proformas.pdf>

5. Service developments

- 5.1 In addition to the savings proposals, there were a range of issues driving service improvement and change to the service:
- **Performance** - There have been previous concerns about the high numbers of rejected referrals to CAMHS and also the long waiting times to accessing some services within CAMHS.

- **Need and demand** - One in ten children aged between 5 and 16 years (three in every classroom) has a mental health problem, and many continue to have these problems into adulthood.¹
 - **Service user feedback** – Following extensive consultation and service user insight sessions, there was a call from young people, parents and professionals for the need to develop a range of early intervention services that can be accessed via other means such as self-referral and online, but also in other settings, i.e. schools, youth centres etc.
- 5.2. As a response to these issues, commissioners worked closely with local mental health providers including SLaM, to develop a savings and improvement programme. This formed part of the savings proposals that went to Mayor and Cabinet in 2016.
- 5.3. Alongside the savings programme, considerable investment has gone into CAMHS through CCG CAMHS transformation and Pupil Premium Grant (PPG), which have helped to deliver the service improvements. CAMHS transformation funding has been awarded through the CCG over six years (until 2020/21) to transform the way in which child and adolescent mental health services are delivered locally.
- 5.4. Key aspects of the improvement programme have been:
- **Implementation of the ‘CAPA’ programme and waiting list initiative** across CAMHS to improve access into CAMHS services and reduce waiting times
 - **The Young People’s Health and Wellbeing Service** is operating across Lewisham for CYP aged 10-19 (up to 25 for children with additional needs), the online counselling element has been embedded within this offer, alongside substance misuse and sexual health support, offering a much more holistic offer to young people
 - **The Children’s Wellbeing Practitioner Programme** has been established to support children with lower level mental health needs
 - **The Community Adolescent Eating Disorder Service** has been extended to include a school’s training programme and a ‘clinician-led’ self-referral help line for young people, parents and professionals
 - **Development of crisis care team**, which offers mental health outreach support into Lewisham hospital, supporting young people who present in A&E
 - **Development of a CAMHS team linked to the Virtual School for Looked After Children**, to improve educational outcomes of this cohort of CYP.
 - **Trauma informed approach to training and supervision** has been embedded within the Youth Offending Service
- 5.5. The additional funding to CAMHS includes:
- **£300K** one off funding investment to SLaM over 16/17 - 18/19 to support the CAMHS CAPA transformation programme and the waiting list initiative
 - Annual CAMHS Transformation investment to SLaM to the value of **£614K** which covers a range of mental health provision, such as crisis care, support for children with SEND, the children’s wellbeing practitioner programme and those with eating disorders
 - Annual investment of **£196K** to SLaM through the Pupil Premium Grant to support the LAC Virtual School and the Hospital Outreach Programme to improve educational

¹ Source: Green h, McGinnity A, Meltzer h et al. (2005) *Mental Health of Children and Young People in Great Britain, 2004*. Basingstoke: Palgrave Macmillan

outcomes for children in the care system and for those not in school due to mental health concerns.

- Additional funding of **£200K** to offer evidence based mental health support through the voluntary and community sector.

6. Conclusion

- 6.1 The service changes underway in CAMHS currently, including the restructure of staff, are delivering the service improvement plan as well as the council budget savings, which have been developed in alignment with each other.
- 6.2 Although the LA has agreed proposals to reduce its funding by £244k, Lewisham's LA funding into CAMHS benchmarks well against other SE London Boroughs.
- 6.3 The additional CAMHS Transformation Fund investment however means that overall, even with the LA savings, the CAMHS funding has increased and is leading to an improvement in the way in which services are structured and delivered – in a way that is able to meet demand as it changes in the Borough. This means having a range of responses to different needs; being able to assess and intervene more quickly; to deliver in a range of community and clinic settings; and to support other frontline practitioners with mental health and emotional wellbeing issues.
- 6.4 Lewisham CAMHS receives on average between 300-350 referrals per quarter. Referral numbers have not noticeably increased over recent years but commissioners acknowledge that cases are becoming more complex. The number of accepted referrals has increased over the last 12 months to approximately 70%, (previously 60-65%), which is likely to be as a direct result of additional provision within the CAMHS service.
- 6.5 Through robust contract management arrangements, measures will be taken to ensure effective step up, step down processes between SLaM and non-SLaM mental health services, to enable efficient use of available resources, preventing escalation of need wherever possible. We will continue to work with stakeholders to understand resources and gaps in provision, managing risks and providing mitigation, to ensure resources are effectively targeted.

CYP SELECT COMMITTEE		
Report Title	Children's Social Care Roadmap	
Key decision	No	Item No. 8
Ward		
Contributors	Executive Director of Children and Young People Director of Children's Social Care	
CLASS	Part 1	

1 Summary of the Report

- 1.1 The purpose of this report is to provide an overview of the Children's Social Care Roadmap, being the strategic plan to facilitate service transformation, continuous improvement, investment and delivery of a financially sustainable budget. The report provides an update following the Children's Social Care report to PAC in September 2017.

2 Recommendations

- 2.1 The CYP Select Committee is invited to note and comment on the report.

3 Policy Context

- 3.1 Children Social Care continues to contribute to five of the key priority outcomes of Lewisham's Sustainable Community Strategy 2008-2020:

- **Ambitious and achieving** – where people are inspired and supported to fulfil their potential.
- **Safer** – where people feel safe and live free from crime, antisocial behaviour and abuse.
- **Empowered and responsible** – where people are actively involved in their local area and contribute to supportive communities.
- **Healthy, active and enjoyable** – where people can actively participate in maintaining and improving their health and well-being.
- **Dynamic and prosperous** – where people are part of vibrant communities and town centres, well connected to London and beyond.

- 3.2 Children's Social Care (CSC) contributes to the Children and Young People's Plan 2016-2018 and its 5 priorities: Be healthy, Stay Safe, Enjoy and Achieve, Make a positive contribution and Achieve economic wellbeing.

4 Local Context

- 4.1 Lewisham was last subject to a full inspection of our CSC service in November 2015, with the report published in February 2016. In December 2017 the new CSC framework for inspection was launched by Ofsted with detailed briefings planned for January 2018. The new 'Inspection of Local Authority Children's Services' (ILACS), is a programme of proportionate inspection with a more detailed focus on Local Authorities graded as 'Requires Improvement;' Lewisham along with the majority of other councils would fall into this category. ILACS will run concurrently with the

multi-inspectorate Joint Targeted Area Inspections (JTAI) and also include a self-assessment, annual meeting with Ofsted and focussed inspection visits outside of the main inspection. Based on current arrangements Lewisham would expect to receive a further inspection within the next 2 years or equally could receive a thematic inspection through the Joint Targeted Area Review (JTAI) inspection arrangements from any time from now onwards.

- 4.2 All aspects of CSC fall under the Ofsted regulatory framework and in effect this sets standards which the Council is required to adhere to. The local authority is not free (as with some council services) simply to 'cut its coat according to its cloth' but rather is expected to provide a service that meets requirements. If an Ofsted inspection finds (as in a number of London boroughs) that standards are not met, the Council is required to rectify this or risks CSC being removed from Council control.
- 4.3 Since the last inspection there has been significant activity to complete the Ofsted Improvement plan which has previously been reported to CYP Select Committee. The improvement plan and associated activity has led to developments in:
- Implementation of new MASH and Early help arrangements
 - Digitalisation and support for social workers with the roll out of new technology
 - Focus on data cleansing and the use of performance information to drive service improvement.
 - Implementation of a new Quality Assurance strategy and associated activity
 - Development of a comprehensive workforce strategy.
- 4.4 Given the scale of transformation within the Department, much of this work is still in train and has led to identification of further service requirements as well as opportunities that are outlined within the Roadmap. Equally there are a number of challenges that are driving local and national demand for service provision associated with economic disadvantage, increased child poverty and with intergenerational problems of mental health and deprivation, including:
- Increase in incidence of poor parental mental health linked with substance abuse, leading to neglect of children and poor attachment
 - Increase in problems of adolescent mental health (e.g. increasing incidence of self-harm, eating disorders, suicidal ideation)
 - Increase in gang involvement in drug dealing, leading to exploitation of vulnerable young people, including sexual exploitation and peer on peer abuse
 - Increase in homelessness, mobility and transience
 - Increase in Unaccompanied Asylum Seeking Children
- 4.5 In more recent months we have seen an increase in the conversion of contacts to referral, this in turn has increased the volumes of assessment and intervention work required as outlined within Figure 1 below.

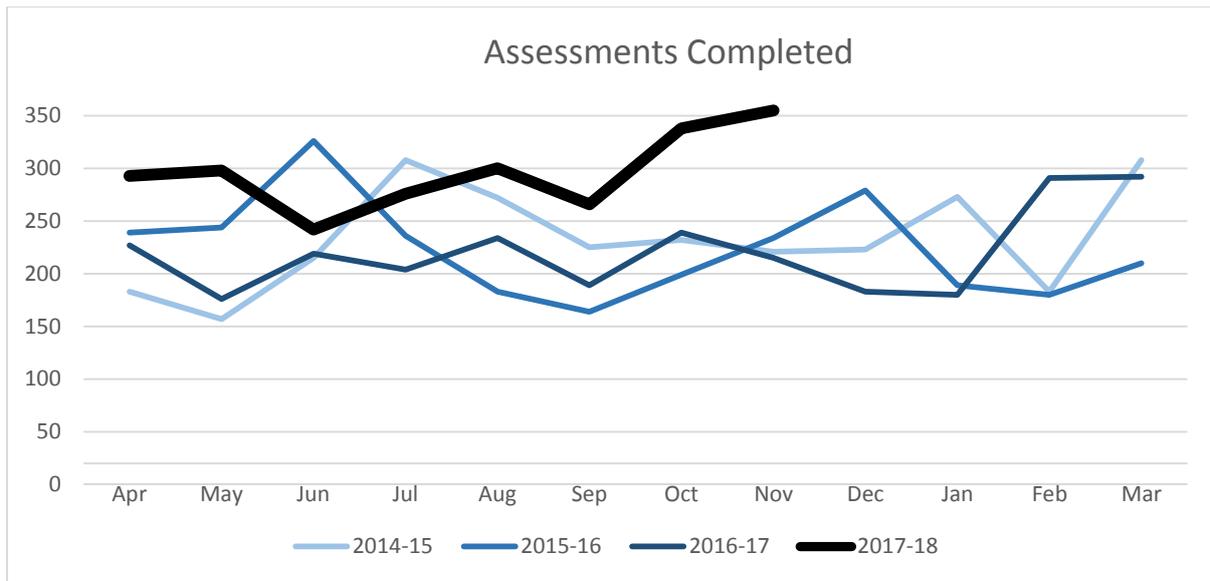


Figure 1 Assessments completed 2015-18

4.6 This has led to caseload pressures and requirements for interim action to address this.

Team	Average number of cases per social worker December 2017	
	Target	Actual
Referral & Assessment	10	22
Family Social Work Service	15	17
Social workers within LAC/Leaving Care	15	14
Personal Advisors within LAC/Leaving Care	20	24

Figure 2 Service area caseload numbers

4.7 In turn staffing pressures have impacted on budget as detailed below through:

- Service demand, since to enable social workers to operate safely and effectively appropriate capacity is needed
- Recent increases across London in agency staff, driven by the competitive market for staff
- Rates of maternity leave across the service
- Implementation of improvement plans following a critical Ofsted report published early in 2016 which rated Lewisham CSC as 'requires improvement'.

5. Budget

5.1 The Council is forecasting an overspend of £13.1m against the directorates' net general fund revenue budget. This compares to a final outturn of £7m for 2016/17 which resulted after applying £2.8m of funding for 'risks and other budget pressures' against the directorates' year-end overspend of £9.8m for that year.

- 5.2 Of the forecast the element that relates to Children and Young People's is £7.6m. The most significant cost pressures for the Directorate fall within the Children's Social Care division which amounts to £5.7m. The placement budget for looked after children is currently forecast to overspend by £2.1m. There is an additional pressure on the section 17 unrelated to no recourse to public funds of £0.8m. This budget meets the needs of families who are intentionally homeless. In addition, the salaries and wages budget shows a forecast overspend of £1.4m in line with the above demand pressures. Furthermore, a total investment of £0.6m has been made in the 'new front door' service which is designed to meet safeguarding requirements and bring costs down in the future. The unachieved historic savings across the division amount to £0.8m.
- 5.3 Over the last eight years, the Council has undertaken a major budget reduction programme to manage the difficult financial challenge it has been faced with. In the period 2010/11 to 2017/18 the Council has implemented savings of £160m, with work underway to identify and deliver a further £32m by 2019/20. The Children and Young People's (CYP) Directorate represents roughly 25% of the total General Fund spend across the Council. For its part, Children Social Care (CSC) makes up 80% of the CYP spend and 20% of the total General Fund spend across the council.
- 5.4 In 2010/11 the CYP budget was £76.4m and through the period of the government's austerity programme, it has been reduced to £48.7m, a reduction of £27.7m or 36%. The net budget in CSC was approximately £50m and is now £37.6m. Corporately this £13.8m of savings represents 9% of the total corporate savings made. This is consistent with Council decisions to protect front line services. The savings made since 2010 in CSC are shown below:

	£m
2010/11	0.2
2011/12	3.6
2012/13	0.3
2013/14	0.5
2014/15	0.3
2015/16	4.2
2016/17	1.4
2017/18	3.3
	13.8

6 National and London context

- 6.1 The Local Government Chronicle reported in August 2017 that across England, spending on children's social care is outstripping budgets by close to £1 billion, estimated to rise to £2 billion by 2020. This research found that over that last three years, around 4 out of 5 councils had overspent and that while budgets had increased by an average of 2.5%, spending had gone up by 5%. This situation has been the subject of representations to central government from the LGA and the Association of Directors of Children's Services. Nationally the number of looked after children has increased. Expectations of children's services have never been higher, yet many of the non-statutory preventative services have been eroded since the beginning of the austerity programme. DfE figures show that in the 10 years from 2006 to 2016, the number of child protection enquiries nationally increased from 72,000 to 172,000.

6.2 In 2017 London Councils released an initial report on their analysis of spend in children’s social care. Patterns of overall children’s social care spend vary significantly between boroughs over the past four years: spend increased in 13 boroughs and decreased in 8 boroughs. Lewisham is one of the boroughs where spend decreased.

6.3 The main findings from the London Councils research are below:

- Overspends are widespread in children’s social care: in 2016/17, 25 out of 28 boroughs overspent on children’s social care budgets – equating to £3.4m per borough or 9.6 per cent of aggregate budgets
- Overspends as a proportion of budgets are slightly higher in outer London (10.0% compared to 8.9% in inner London). Lewisham is 9.3%
- Amongst the 22 boroughs providing full data over the past four years, the number of boroughs experiencing overspends increased from 15 to 21 between 2013/14 and 2016/17
- Many (but not all) boroughs experienced a large increase in overspends in 2016/17, driving an increase in the average overspend from £2.3m in 2015/16 to £3.5 million in 2016/17
- The two main areas of spend are core staffing budgets and placement budgets. At an aggregate level, overspends are equivalent to 12 % of core staffing budgets (compared with 11% in Lewisham) and 18 % of placement budgets (compared with 12% in Lewisham)
- 19 out of 28 boroughs overspent on both core staffing and placement budgets in 2016/17
- Across 29 boroughs providing data, the number of LAC (start of year) fell from 9,017 in 2013/14 to 8,878 in 2016/17. This masks significant variation between boroughs – 14 boroughs experienced an increase in LAC numbers, 13 boroughs experienced a decrease and 2 boroughs experienced no change. Lewisham experienced a small decrease although in the latter part of 2017 we have started to see a small increase.

6.4 The following table compares Lewisham spend with the rest of Inner London, the figures are based on an amount per population of the 0 -17 age group. They relate to the 2016/17 budgets. The content of the costs included in the calculation may vary between boroughs.

	Total children looked after costs £	Social worker costs £
Camden	428	167
Greenwich	449	207
Hackney	327	249
Hammersmith & Fulham	471	193
Islington	517	381
Kensington & Chelsea	241	297
Lambeth	565	136
Lewisham	399	132
Southwark	462	307
Tower Hamlets	300	103
Wandsworth	238	193
Westminster	256	201

7. Roadmap for service improvement and budget reduction

7.1 The Ofsted report in 2016 identified that there needed to be a major improvement programme for CSC, focusing on greater rigor, improved recording and performance management and much better systems and processes. The work achieved so far has necessitated investment in bringing the service's IT up to date, ensuring that the social workers have phones and ipads to enable mobile and secure working, a huge data cleansing exercise and development of a new performance framework. All this has necessitated investment from the corporate centre beyond that identified in the CSC budget. Alongside this, officers have been working to analyse the budget and develop a 'road map' towards reducing budget overspends. The strategies can be summarised as follows:

- Recruiting additional foster carers to reduce reliance on high cost independent fostering agencies - £1.4m.
- Working to reduce relatively high numbers in residential placements through stronger gatekeeping, monitoring and developing homegrown alternatives - £0.5m.
- Reducing reliance on agency staff through a strong workforce strategy and encouraging agency staff to become council employees – £0.4m.
- More effective front door and early help to reduce escalation to 'high end.'
- Intervention at the edge of care to prevent high cost adolescents coming into the care system.
- Better procurement to get best possible VFM from suppliers (placements, agency staff, contracts.)
- Effective joint working with Housing Needs to reduce costs of intentional homelessness and improve housing options for care leavers - £0.5m.
- Better systems and processes to promote improved value for money and eliminate waste.

Each of these strategies is explained in more detail below:

7.2 Recruiting additional foster carers to reduce reliance on high cost independent fostering agencies

Rationale	A comprehensive and effective fostering strategy will increase the number of in-house foster carers to bring us into line and ultimately outperform our statistical neighbours and reduce the overall cost of placements. This will ensure our Looked After Children are locally placed in high quality placements, with good placement matching and choice.
ACTIONS	
<u>Undertaken</u> The contract for in-house foster care recruitment with a voluntary sector organisation has been terminated and in-house recruitment of foster carers commenced from July 2017.	<u>Planned</u> Reinvestment of £96k cost of recruitment contract into a new fostering recruitment service to demonstrate potential return from larger scale investment in recruitment of foster carers

<p>A comprehensive fostering strategy and associated action plan has been developed.</p> <p>Improved support arrangements for our foster carers has led to an increase in children placed with Lewisham foster carers.</p> <p>Limited marketing activity in 2017/18 has already led to 10 new Lewisham foster carer assessments being progressed representing a full year saving of £250k compared to IFA placement.</p>	<p>Development of in house fostering recruitment team. Recruitment is monitored to track spend, delivery and savings</p>
<p>Investment in service improvement to date £0k</p>	<p>Additional investment required To reinvest up to £400k savings for recruitment and support of additional carers on sliding scale following 'proof of concept.'</p>
<p>Savings achieved to date: £96k cost of under-performing recruitment contract recycled into in-house approach</p>	<p>Further savings planned: Potential for large scale savings: On average an in-house foster placement costs £22k per annum and an independent fostering placement costs £48k per annum. A difference of £26k per annum. If the strategy is successful and 72 independent places are moved to in-house places a saving of £1.9m would be made. After taking into account the investment costs the net saving would be £1.4m per annum.</p> <p>The strategy represents an increase of 90 in house foster care placements by April 2020.</p> <p>This can be profiled over time as follows: Year 1 £50k Year 2 £600K Year 3 £1,400k</p>
<p>How will we know it's working?</p> <p>Ratio of in-house foster carers to agency, currently 40:60 and the target is to move it to 60:40</p>	
<p>Risks Recruitment of foster carers is a slow process, with a competitive market across London Children in existing placements cannot (and should not) be moved if their placement is working well and they are settled and happy, so the change can only affect new placements</p>	

7.3 Working to reduce relatively high numbers in residential placements through stronger gatekeeping, monitoring and developing home grown alternatives

Rationale	Rigorous gatekeeping, monitoring and tracking of all residential and semi-independent placements ensures that young people are in the right placement for an appropriate length of time, with an exit strategy if appropriate. In addition tight monitoring of contracts ensures that the agreed contract is being delivered and where appropriate, the cost of the contract is brought in line with the service requirement and needs of the young person. Joint development of Lewisham provision can lead to improved outcomes for children as well as yield savings.
Overall savings target	£190k
ACTIONS	
<u>Undertaken</u>	<u>Planned</u>
<p>A Care Scrutiny (Placement Panel) meets weekly to review all new or higher cost placements</p> <p>Our placement procurement team has been strengthened to ensure the best placement at the best cost is identified; within this a Family Finder is in post to facilitate identification and transition to lower cost placements in line with a child's care plan.</p> <p>An event including both internal and external partners is planned in January to scope the development of a residential facility with wrap around foster care support and intensive support for some of our most vulnerable young people. We are fortunate to have agreed free consultancy from the Innovation Unit to progress this.</p>	<p>Identify whether it is feasible to work with a partner to develop local residential/intensive foster care provision which will reduce the need to place in high cost residential outside Lewisham. This was the substance of an Innovation Fund bid to DfE which was not successful but can be pursued if a case can be made for capital investment.</p>
Investment in service improvement to date £50k – recouped through savings in placements	Additional investment required Potential Capital Bid.
Savings achieved to date: Net £140k	Further savings planned: Will be quantified as part of developing options for local provision
How will we know it's working? Reduction in average unit placement cost Reduction in the use of residential placements Further reduction in placement breakdown due to better matching	

Risks

The market for residential care is subject to high demand and increasing unit costs in line with opportunities for private providers' profit margins.

Ofsted inspection standards for residential care make providers less willing to accept children with more complex needs; for those that will this often involves additional resource allocation, for example 2:1 staffing arrangements.

With small numbers of children with complex issues making a big impact on budget, it is challenging to predict demand and need in high cost placements.

7.4 Reducing reliance on agency staff and workforce development.

Rationale	To ensure good outcomes for children we need a stable well trained and equipped workforce. Given that each agency worker costs an additional £12k per annum when compared to those permanently employed, if we improve our recruitment and retention of social workers, we will save money.
ACTIONS	
<p><u>Undertaken</u></p> <p>A workforce strategy is in place, endorsed by CYP Select Committee November 2016 which includes:</p> <ul style="list-style-type: none"> • Retention strategies and developments • Recruitment developments • Procedural clarity • Consultation and communication arrangements • Learning and development <p>All Staff Forums, monthly All Managers meetings staff, Quarterly service days have been introduced across CSC.</p> <p>Revised tracking systems are in place for permanent recruitment, vacancies and agency use to improve accountability and timeliness.</p> <p>Lewisham is one of four partners (Goldsmiths University, Southwark & Greenwich Council) which form the Dfe funded South East London Teaching Partnership. This leads to a range of social work development opportunities.</p> <p>Retention of social workers is improving and is now above national benchmarks; for</p>	<p><u>Planned</u></p> <p>A new Induction policy is being launched this month.</p> <p>A revised supervision framework has been launched</p> <p>Leadership development programme agreed with the SELTP and Corporately within the Council; a new DfE bid is currently being submitted.</p> <p>The learning and development career framework has been agreed</p> <p>Social work recruitment via the DfE Step up Social Work recruitment programme is being developed within the SELTP.</p> <p>Championing Children, Transforming Futures transformation programme based on a systemic model of social work intervention continues in development and delivery.</p> <p>We are reviewing our demand management strategies and capacity for children in need as well as management capacity to improve system management, drive performance outcomes to ensure continuous</p>

the first 6 months of 2017/18 turnover was 3.4% against the national turnover rates for CSC of 15.1%	improvement in our delivery.
How will we know it's working?	
Reduced level of agency workers – target 10%. Will never be 0% because of maternity and long term sickness cover. Ongoing improvement in retention, internal and external audit validation of service effectiveness.	
Risks	
Social work pay and the housing market may drive social workers to agency work or higher salaried authorities; social workers are nationally in high demand still.	
Caseload pressures particularly in the Referral and Assessment services increase the risk of staff turnover and impact on improvement strategies.	

7.5 More effective front door and early help to reduce escalation to 'high end'

Rationale	More effective early help and an effective front door will give families the support when they need it and reduce escalation to higher cost services, in particular becoming looked after
ACTIONS	
<u>Undertaken</u>	<u>Planned</u>
<p>A new MASH (Multi-Agency Safeguarding Hub) Early Help team and front door team has been set up to support families to avoid the need for more statutory intervention; to better assess levels of need and match to service and meet Ofsted requirements.</p> <p>There are a range of partners sited within the MASH</p> <p>A 'Continuum of Need' has been developed to give clarity on responsibilities for service provision for CSC and partners agencies across the ascribed levels of need.</p> <p>Referrals to partner agencies from the MASH are tracked to ensure engagement and promote outcomes sought.</p> <p>A revised Early Help Assessment has been developed and rolled out across the partnership.</p>	<p>The formal launch of our new Early Help arrangements to further promote this across the partnership in March 2018.</p> <p>Complete partnership engagement in the MASH with recruitment of SLAM links.</p> <p>Address continued high referral rate from the police by achieving a better common understanding of thresholds.</p>

Revised Early Help Training is being delivered by the Early Help Team.	
Investment in service improvement to date £600k	Additional investment required £0k
Savings achieved to date: £0k	Further savings planned None prior to 2020
How will we know it's working? Tracking numbers of referrals accepted by CSC Increased engagement of families with early help services Slowing demand on specialist CSC services Service quality audits (and multi-agency audits carried out by LSCB) and Ofsted inspection	
Risks Impact will take time to deliver, important that service is allowed time to embed. The needs of the partnership for safeguarding support may outstrip supply	

7.6 Intervention at the edge of care to prevent high cost adolescents coming into the care system

Rationale	Lower cost early help key worker support for adolescents in crisis and at risk of coming into care will prevent escalation and future high placement costs
ACTIONS	
<u>Undertaken</u> The First Options service is now in place. This consists of redeployed formerly ESF funded key workers as team to support adolescents in crisis, linked with early help service and front door/MASH. The First Options Team have been: <ul style="list-style-type: none"> - Provided with a Departmental induction - Trained through the SELTP In restorative approaches - Trained in trauma informed practice The numbers of young people who have been prevented from becoming LAC in the first 2 quarters of 2017 is 54; the number of delayed/planned admission to care through the work of the team is 1; the number of young people successfully rehabilitated home from care 1; this amounts to cost avoidance of c£600k (based on half the costs of 54 young people not entering care	<u>Planned</u> Keep the effectiveness of the team under review and improve links with other relevant early help services (Youth First and YOS) to maximise support for young people and impact on outcomes. Evaluation of qualitative impact is being undertaken currently by Goldsmith's University as part of the SELTP arrangements.

and 1 rehabilitation home, unit costs are based on in house foster care rates.)	
Investment in service improvement to date £300k per annum	Additional investment required Ongoing commitment to fund staff
Savings achieved to date: Cost avoidance of c£600k	Further savings planned Cost avoidance of at least £500k per year
How will we know it's working? <ul style="list-style-type: none"> - Number of children where the young person remains with their family post intervention - Number of delayed/planned admissions to care 	
Risks None	

7.7 Better procurement to get best possible VFM from suppliers (placements, agency staff, contracts)

Objective/rationale	Improved procurement and contract management across children's social care will improve value for money in a volatile and fragmented market place
ACTIONS	
<u>Undertaken</u> A contract officer is now in place to ensure monitoring of individual placement agreements, recharges and discounts are applied. We have maintained a private provider framework agreement with Independent Fostering Agencies, to achieve cost volume and placement discounts, avoiding cost increases for the last 8 years. A South London consortium Innovation Dfe bid in was successful and is currently being developed to better commission and procure savings on residential care.	<u>Planned</u> Ongoing participation in South London Consortium and any other partnership arrangements which deliver savings
Investment in service improvement to date £40k	Additional investment required £0k
Savings achieved to date: £160k	Further savings required £0k
Key performance outcomes <ul style="list-style-type: none"> - Reduced unit costs for placement costs - Individual placement agreements in place 	

Risks

The market for residential care is subject to high demand and increasing unit costs in line with opportunities for private providers' profit margins.

Ofsted inspection standards for residential care make providers less willing to accept children with more complex needs; for those that will this often involves additional resource allocation, for example 2:1 staffing arrangements.

With smaller numbers making a big impact on budget it is challenging to predict demand and need in high cost placements.

7.8 Effective joint working with Housing Needs to reduce costs of intentional homelessness and improve housing options for care leavers

Objective/rationale	To minimise the cost of intentional homeless needs and to ensure that the most cost effective housing is provided for care leavers
ACTIONS	
<p>Undertaken</p> <p>The cost of care leavers accommodation has been reduced by commissioning of approved provider supported housing units.</p> <p>Systems are in place to ensure all housing benefits are claimed for all care leavers in semi-independent accommodation.</p> <p>Additional Shared Housing Units have been jointly procured with housing for young people outside of Lewisham.</p> <p>A joint Housing/CSC Strategy group is in place and meets regularly.</p> <p>Housing partners sit on the weekly Care Scrutiny panel and have now joined MASH.</p> <p>Arrangements for response to young people presenting as homeless has been strengthened and joint training with CSC and Housing undertaken.</p> <p>Any external housing funded by CSC due to intentional homelessness is now procured through Housing to ensure vfm.</p> <p>A review panel has been put in place for all intentional homelessness cases which has assisted reductions in projected spend.</p>	<p>Planned</p> <p>A new contract is currently out to tender for semi-independence providers to ensure quality and improved vfm.</p> <p>Additional 10 housing units from preferred providers are being commissioned for young people under 18 to avoid spot purchase.</p>

A CSC bid has been successful to the DCLG Controlling migration fund for support for our care leavers in semi-independent accommodation.	
Investment in service improvement to date £0k	Additional investment required £0k
Savings achieved to date: £1,600k	Further savings planned £500k
Key performance outcomes	

7.9 The overall summary of savings planned are as follows

Ref	Strategy	Savings	
		Made £'000	Future £'000
6.2	Recruiting additional foster cares		1,400
6.3	Reduce residential places	190	500
6.4	Reducing agency staff		400
6.5	More effective from door		
6.6	Intervention at edge of care		500
6.7	Better procurement	160	
6.8	Reduce Intentional homelessness and improve care leavers	1,600	500
	TOTAL	1,950	3,300

8 Conclusion

8.1 This report gives an overview of the service requirements, budget position and Roadmap for service improvement and delivery of a balanced budget. This can only be achieved through transformational change with investment in safeguarding services to ensure a robust response to need and service improvement, whilst promoting value for money and eliminating waste to allow for savings and reinvestment, for example through better procurement of support for our care leavers. A key development is our fostering strategy in delivering improved outcomes for our children whilst delivering good value for money and high quality care. All the initiatives which are being undertaken and are described in this report involve a degree of systems change and therefore require careful planning and investment and understandably do take time to embed full impact. The problems faced by Lewisham are common across London and beyond. London Councils are working with the LGA on lobbying strategies to highlight the scale of the problem.

9 Financial implications

- 9.1 There are no specific financial implications to this report although it concerns the council's finances.

10 Legal implications

- 9.1 Services to children and families in Lewisham are provided pursuant to the relevant legislation, namely the Children Act 1989, the Care Standards Act 2000, Children (Leaving Care) Act 2000, Adoption and Children Act 2002, Children Act 2004, Children and Young Persons Act 2008, Children and Families Act 2014 and the Children and Social Work Act 2017. In addition, there are transitional responsibilities for young people with additional needs, set out in the Care Act 2014 and related regulation and guidance. As referred to in this report, many of the Council's services are provided by way of duties owed to individuals, and there is limited scope for the exercise of discretionary decision – making save following clear and analytical professional assessment, taking into account relevant factors and having regard to the scope of the support required.

11 Crime and disorder implications

- 11.1 Children's Social Care works very closely with Youth Offending as they work with many of the same young people and their families. The police are key partners in the MASH and LSCB and Children and Young People Directorate is a key part of the Safer Lewisham Partnership.

12 Equalities implications

- 12.1 CSC is designed to promote equality of opportunity by giving children a better start in life than they would without the service's intervention. The service inevitably deals predominantly with those who are disadvantaged economically, in terms of disability, health and other protected characteristics.

If there are any queries on this report please contact Sara Williams, Executive Director for CYP sara.williams@lewisham.gov.uk, Stephen Kitchman, Director for Children's Social Care Stephen.kitchman@lewisham.gov.uk

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