



RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL

CABINET

27TH JANUARY 2022

**CHILDREN'S SERVICES –
LOOKED AFTER CHILDREN PREVENTION STRATEGY 2022-2025**

**REPORT OF THE GROUP DIRECTOR, COMMUNITY AND CHILDREN'S
SERVICES IN DISCUSSIONS WITH THE RELEVANT PORTFOLIO
HOLDER, COUNCILLOR LEYSHON**

Author: Annabel Lloyd, Director of Children's Services

1. PURPOSE OF THE REPORT

- 1.1 The purpose of the report is to provide Cabinet with information regarding the looked after children prevention strategy. The report includes an outline of the services we aim to develop to enhance our offer to families, and the resources that are required to make that possible.

2. RECOMMENDATIONS

It is recommended that the Cabinet:

- 2.1 note the information contained within this report and give formal approval to implement the proposed investment and service developments;
- 2.2 is asked to note the proposal that the Council sign up to the Charter for parents who are in care and leaving care which will be considered at a subsequent Corporate Parenting Board.

3. REASONS FOR RECOMMENDATIONS

- 3.1 Children's Services plan to continue the work aimed at safely supporting families to stay together. A review of the prior looked after children strategy has highlighted that further work is required, some of which can be achieved via deployment of existing resources however, additional resources are requested to support the operational delivery of new services as set out below.

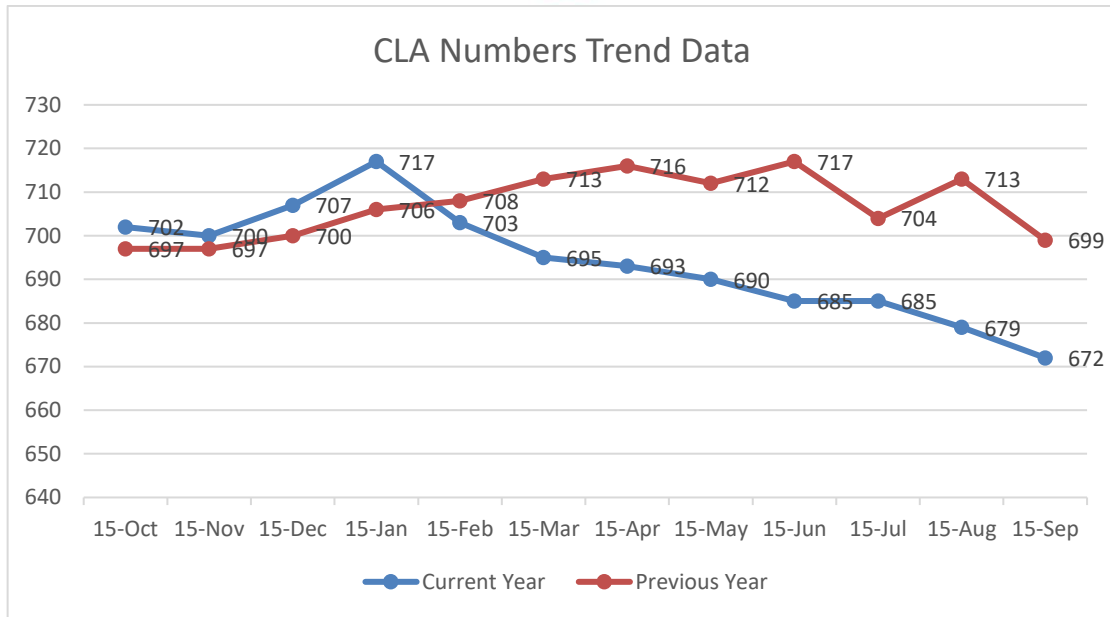


4. BACKGROUND

- 4.1 Children's Services' prevention duty is established in the Social Services and Well-Being (Wales) Act 2014. In line with our legislative duty, and the UN Convention of the Rights of the Child, Children's Services have developed the following vision statement:

Our purpose is to work alongside families to prevent problems from getting worse, to provide support, to safeguard and to improve children's well-being

- 4.2 Children's Services record the child's right to a family life as the central driving principle to their prevention work.
- 4.3 An evaluation of the prior looked after children strategy took place during 2021. The evaluation was informed by a rapid research review, secondary data evaluation, a deep dive of 70 relevant cases, and focus groups, further information about the evaluation can be found at Appendix I. Overall, the evaluation found that the first looked after children prevention strategy had delivered important changes that have enabled the service to make progress. Those important developments are evidenced in the strong decision-making process that puts accountability for looked after decisions at the most senior level in the service, in practice standards that see the management of children's cases towards permanency without delay, and in the performance results where we can demonstrate a gradual reduction in looked after number (see para 4.4 below). However, there are four areas to build upon in order to sustain this and develop services further in a way that optimises our offer to families at risk of parent – child separation.
- 4.4 Acknowledging that it is a difficult and sometimes unpredictable area of business for the Council, that we will always prioritise our safeguarding duty, and that we face the uncertainty of the post pandemic impact for vulnerable families, it has been promising to see steady decline in the rate at which children become looked after in RCT. This is illustrated below:



4.5 The fuller looked after prevention strategy and action plan is included at Appendix I. However, a summary of our 4 next steps is below:

Four Improvement and development areas	Why do we want to improve this area?
<p>1. Model of Practice</p> <p>Development of a clear practice model for social workers and allied staff working with families referred to Children's Social Care for support, including to generate better engagement of families who are in 'pre-contemplation' (who have not yet come to the view that they need or want to change). This is a significant development and will require a step-change throughout the service.</p>	<ul style="list-style-type: none"> To ensure that staff have the guidance, support and skills to practice to a consistent and evidence based To be clear about the RCT model of practice To generate better engagement of families including those in 'pre-contemplation' To enable even more effective relationship-based and successful involvements with families To reduce the need for children to become looked after To attract and retain staff
<p>2. Better Pre-birth Services</p> <p>Development of a specific pathway and set of supports for families referred to Children's Social Care during a pregnancy to enable earlier intervention with parents considered to be very vulnerable before the child is born.</p> <p>Linked with this, improvements to the support available to parents who have had a child removed from their care. A</p>	<ul style="list-style-type: none"> To improve the parents' resilience, reduce risk factors and reduce the need for infants to come into care To reduce the likelihood of parents who have had one child removed having subsequent children removed from their care To reduce the likelihood of care experienced parents being separated from their children

<p>proposal has been developed called Magu- see 4.6 below.</p>	
<p><u>3.Developing reunification</u></p> <p>Development of a more coherent and consistent approach to reunifying children home who have spent some time being looked after by the local authority.</p>	<ul style="list-style-type: none"> • A more consistent approach will lead to more children being reunified successfully and reduced pressure on the looked after population
<p><u>4.Improve support for kinship carers and special guardians</u></p> <p>Strengthening of the support to be offered to children living with extended family - in kinship care and / or with a Special Guardian, including to their carers</p>	<ul style="list-style-type: none"> • Reduce the likelihood of a breakdown in these placements with kinship carers and special guardians • Improve outcomes for children

Better Pre-birth Services - Magu

- 4.6 In light of the investment requested in relation to improvement 2, additional information is provided. The fuller business case can be found at Appendix II. The term 'Magu' translates from Welsh as *'to bring up, rear, nurture, raise, gain'* and promotes the ongoing long-term nature of the support required to deliver better outcomes.
- 4.7 There is clear evidence in support of this proposal:
- High and increasing rates of children coming into care aged under one year of age, currently 34% of looked after children are under 1,
 - 63% of new born children who became looked after are from families where older children had already been removed or were on the child protection register themselves,
 - Identified as a gap in current service provision in Rhondda Cynon Taf in independent evaluation.
- 4.8 As is illustrated above, whilst Children's Services have seen the rate at which children become looked after reduce by 9%, the rate at which children under 1 become looked after has increased. This feature of the data was confirmed in the September 2021 performance report and is illustrated below. It has become a steady feature in performance reporting for more than 3 years.

Age	Total 2019/20	% of Admissions	Total 2020/21	% of Admissions
Under 1	38	25%	45	33%
Age 1	10	7%	9	7%
Age 2	10	7%	9	7%
Age 3	10	7%	5	4%
Age 4	4	3%	4	3%
Age 5	3	2%	5	4%
Age 6	6	4%	9	7%
Age 7	5	3%	4	3%
Age 8	4	3%	6	4%
Age 9	7	5%	6	4%
Age 10	7	5%	0	0%
Age 11	2	1%	5	4%
Age 12	6	4%	5	4%
Age 13	11	7%	5	4%
Age 14	6	4%	5	4%
Age 15	11	7%	6	4%
Age 16	5	3%	6	4%
Age 17	5	3%	2	1%
Total	150	100%	136	100%

- 4.9 The Magu project proposal is informed by the rapid research review aspect of the CLA evaluation, and local intelligence of ‘what works’. It is aimed at addressing this area of need, and the traumatic impact for parents of repeat separation from their baby at birth. Worryingly, we have found high rates of care experienced parents in this cohort.
- 4.10 The development of Magu has coincided with the publication of Cascade research into the experiences of parents in care and leaving care. (The study can be found at: <https://cascadewales.org/first-signatories-for-innovative-charter-announced>.) The study found evidence highlighting the potential for stigma and discrimination, showing concerning levels of statutory intervention and separation, as well as variable and under-developed support services. The study concluded that urgent policy and practice attention was needed at national, local and individual levels to improve corporate parent support responses to parents in and leaving care.
- 4.11 The Council is asked to consider being signatories to the Charter for Parents who are in care and Leaving Care that is part of the plan for change in relation to the Cascade research that is highlighted above. The charter itself documents a promise of a fair and attuned supportive approach to parents who are in care or leaving care and will be considered at a future Corporate Parenting Board.

- 4.12 The establishment of Magu would provide strong assurance to care experienced parents that we can deliver against those promises. The proposed Project, if established, will deliver an integrated care pathway for pregnant women and their families across early intervention and edge of care services that focuses on building skills, resilience and reducing risk. A single agreed early intervention approach would deliver the opportunity to prevent children entering care at birth as well as provide consistency and continuity for families whose care requires step up to statutory intervention.
- 4.13 If the investment is supported, the performance of the service, once established will be monitored in the following ways:

Early help: Resilience Families phases of intervention	Statutory / intensive phases of intervention
<ul style="list-style-type: none"> • No of referrals to RFS accessing Magu intervention • No of families completing RFS Magu intervention • No of cases closed at end of Magu intervention • No of cases stepped up at end of RFS Magu intervention 	<ul style="list-style-type: none"> • No of referrals to Magu Team • No of referrals accepted • No women and families-disengaged • Outcomes: child's legal status at exit • Customer feedback for each intervention

5. **EQUALITY AND DIVERSITY IMPLICATIONS**

- 5.1 An Equality Impact Assessment has been carried out and the initial screening test has not identified any negative impacts. A fuller assessment will be carried out in the event that the funding proposal is supported. All of the services identified here are available to all families on a basis of risk and need irrespective of any protected characteristics.
- 5.2 The staff group will benefit from relevant training in this regard. The service and staff skill set will be attuned to reach families who most need the service and will do so in a way that over comes any socio - economic barrier. Supporting families to overcome barriers to improving well-being, accessing services and, where appropriate the workplace will be central to this work. Specifically, the service will seek to address and reverse any discrimination and stigmatisation experienced by parents who are in care and leaving care.



6 WELSH LANGUAGE

- 6.1 A Welsh Language Impact Assessment has been carried out and submitted for review. In the event that the proposal is supported, there will be actions associated with ensuring compliance with the Welsh Language Standards including seeking to appoint bi-lingual staff.

7. CONSULTATION / INVOLVEMENT

- 7.1 Staff and parents with experience of the services took part in a focus group to inform the overall evaluation of the former looked after strategy.
- 7.2 Care experienced young people have been involved in developing the charter that is embedded below. Charter for Parents who are in care and Leaving Care.

8 FINANCIAL IMPLICATION(S)

- 8.1 Financial modelling of the costs has been carried out, and the relationship between better outcomes for vulnerable children, safely reducing looked after populations and improved cost control is well established.
- 8.2 The proposals set out should provide a cost benefit (or cost avoidance) in alongside improving the outcomes for young people. Financial modelling in this regard however is extremely difficult and it is important that we evaluate the impact as the proposals are implemented and given time to deliver intended outcomes. Nonetheless, this gap in service provision cannot be closed within existing resources without standing down other essential services, therefore additional investment is required.
- 8.3 Whilst the overall cost of the Magu proposal would amount to £418k, it is proposed that the team be incrementally stepped up, alongside ongoing prioritisation and evaluation to ensure that the identified outcomes are being realised and to provide some flexibility of approach. In this way, we can fund from existing one-off resources and pending evaluation of outcomes, can then transition and mainstream into the Councils base budget on a fully informed basis. Some parts of the new service would need to be implemented in full immediately, such as the new model of practice and kinship carer/SGO support arrangements. The MAGU team can be introduced incrementally, and this approach may also be driven by constraints on available resources, particularly availability of qualified social workers.



8.4 Resources and flexibility provided by the Social Care Recovery Fund are available to supplement existing one-off resources to fund this in line with the aforementioned principles.

8.5 The additional investment is included below:

Four Improvement and development area	Funding Source / New Cost
1. Development of a clear practice model for social workers and allied staff working with families referred to Children's Social Care for support, including to generate better engagement of families who are in 'pre-contemplation' (who have not yet come to the view that they need or want to change).	Gr 14 Post to lead, and continuously develop <ul style="list-style-type: none"> • £58,000 per annum
2. Development of a specific pathway and set of supports for families referred to Children's Social Care during a pregnancy to enable earlier intervention with parents considered to be very vulnerable before the child is born. Linked with this, improvements to the support available to parents who have had a child removed from their care. A proposal has been developed called Magu	Team of 9 FTE social care professionals as per the business case in appendix x. <ul style="list-style-type: none"> • £418,000 per annum
3. Development of a more coherent and consistent approach to reunifying children home who have spent some time being looked after by the local authority.	To be delivered within existing resources
4. Strengthening of the support to be offered to children living with extended family - in kinship care and / or with a Special Guardian, including to their carers	1 FTE SW Gr 12; 1 FTE BS GR6; Kinship Cymru Contract <ul style="list-style-type: none"> • Total additional ongoing resource estimated at £150,000 per annum

8.6 Whilst the cost profile of incrementally implementing, as outlined above, will be largely led by the ongoing evaluation of outcomes and resource availability, it is estimated that approximately £300k would be required in year 1.

9 LEGAL IMPLICATIONS OR LEGISLATION CONSIDERED

- 9.1 The proposed development will see the Council enhance its potential to deliver against its prevention duty to families. There are no legal implications arising from this report.

10 LINKS TO THE CORPORATE AND NATIONAL PRIORITIES AND THE WELL-BEING OF FUTURE GENERATIONS ACT.

- 10.1 The implementation of the proposed changes to foster carer allowance allowances will make a positive contribution towards the Council's Corporate Plan Vision of '*a County Borough that has high aspirations, is confident and promotes opportunity for all*'; as it will deliver against the specific priorities of '*People - Promoting independence and positive lives for everyone*' and '*Place - Creating neighbourhoods where people are proud to live and work*'.

- 10.2 It will also help the Council to meet three of the seven wellbeing goals that The Well Being of Future Generations (Wales) Act 2015' puts in place as follows:

- A more equal Wales
- A healthier Wales
- A Wales of cohesive communities

- 10.3 The proposed changes are also consistent with the sustainable approach promoted by the Well-being of Future Generations (Wales) Act through the five ways of working:

- Long-term – the proposals seek to make a long-term difference to people's lives, the way we work with families and the Council's resources.
- Prevention – the proposal is fundamentally focused upon strengthening our prevention offer
- Integration – Partner organisations have been invited to join the steering group and will continue to be involved. Particularly important in terms of integrating a seamless offer to vulnerable families with the Resilient Families Service, and Midwifery
- Collaboration – Families, and staff have been involved in the evaluation and proposal
- Involvement – Families, and staff have been involved in the evaluation and proposal



11 CONCLUSIONS

- 11.1 An evaluation of the previous looked after children strategy has taken place leading to a new one with 4 key improvement areas
- 11.2 By implementing the Children Looked After Prevention Strategy, the Council is providing families with the strongest possible service model for reducing the risk of family breakdown and preventing avoidable entries to the looked after system.

Other Information:-

Relevant Scrutiny Committee

Community and Children's Services Scrutiny Committee

Contact Officer: Annabel Lloyd, Children's Services Director



LOCAL GOVERNMENT ACT 1972

AS AMENDED BY

THE LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985

RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL

CABINET

27TH JANUARY 2022

**REPORT OF THE GROUP DIRECTOR, COMMUNITY AND CHILDREN'S
SERVICES IN DISCUSSIONS WITH THE RELEVANT PORTFOLIO
HOLDER, COUNCILLOR LEYSHON**

**CHILDREN'S SERVICES –
LOOKED AFTER CHILDREN PREVENTION STRATEGY 2022-2025**

Background papers

None

OFFICER TO CONTACT: Annabel Lloyd, Director of Children's Services