



County Offices  
Newland  
Lincoln  
LN1 1YL

11 April 2024

**Children and Young People Scrutiny Committee**

A meeting of the Children and Young People Scrutiny Committee will be held on **Friday, 19 April 2024 at 10.00 am in the Council Chamber, County Offices, Newland, Lincoln LN1 1YL** for the transaction of the business set out on the attached Agenda.

Yours sincerely

A handwritten signature in cursive script that reads 'Debbie Barnes'.

Debbie Barnes OBE  
Chief Executive

**Membership of the Children and Young People Scrutiny Committee**  
**(11 Members of the Council and 3 Added Members)**

Councillors R J Kendrick (Chairman), W H Gray (Vice-Chairman), A J Baxter, A W Briggs, C Matthews, Mrs S A J Nutman, N Sear, T J N Smith, M A Whittington, R A Wright and 1 Vacancy

**Added Members**

Church Representative: M Kyle

Parent Governor Representatives: Mrs M R Machin and Dr E van der Zee



**CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE AGENDA  
FRIDAY, 19 APRIL 2024**

<b>Item</b>	<b>Title</b>	<b>Pages</b>
<b>1</b>	<b>Apologies for Absence / Replacement Members</b>	
<b>2</b>	<b>Declarations of Members' Interests</b>	
<b>3</b>	<b>Minutes of the previous meeting held on 8 March 2024</b>	5 - 10
<b>4</b>	<b>Announcements by the Chairman, Executive Councillors and Lead Officers</b>	
<b>5</b>	<b>Re-commissioning of the Lincolnshire Leaving Care Service</b> <i>(To receive a report from Bridie Fletcher, Senior Commissioning Officer – Children’s Strategic Commissioning, and Amy Allcock, Commissioning Manager – Commercial, which invites the Committee to consider the Re-commissioning of the Lincolnshire Leaving Care Service prior to a decision by the Executive Councillor of Children’s Services, Community Safety, and Procurement and Migration between 24 April - 3 May 2024. The views of the Committee will be reported to the Executive Councillor as part of their consideration of this item)</i>	11 - 78
<b>6</b>	<b>Children and Young People's Mental Health Transformation Programme</b> <i>(To receive a report from Kevin Johnson, Commissioning Manager – Children’s Mental Health, LD and Autism and Charlotte Gray, Head of Service – Children’s Strategic Commissioning, which invites the Committee to review the work that has been undertaken so far as part of the Children and Young People's Mental Health Transformation Programme)</i>	79 - 102
<b>7</b>	<b>Families First for Children Pathfinder Programme</b> <i>(To receive a report from Andy Cook, Head of Service – Families First for Children Pathfinder, which provides an update on the progress of the implementation of the Families First for Children Pathfinder Programme in Lincolnshire)</i>	103 - 176
<b>8</b>	<b>Children and Young People Scrutiny Committee Work Programme</b> <i>(To receive a report from Tracy Johnson, Senior Scrutiny Officer, which enables the Committee to consider and comment on the contents of its work programme to ensure that its scrutiny activity is focused where it can be of greatest benefit)</i>	177 - 184

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**Please note:** for more information about any of the following please contact the Democratic Services Officer responsible for servicing this meeting

- Business of the meeting
- Any special arrangements

Contact details set out above.

Please note: This meeting will be broadcast live on the internet and access can be sought by accessing [Agenda for Children and Young People Scrutiny Committee on Friday, 19th April, 2024, 10.00 am \(moderngov.co.uk\)](#)

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<https://www.lincolnshire.gov.uk/council-business/search-committee-records>



**CHILDREN AND YOUNG PEOPLE SCRUTINY  
COMMITTEE  
8 MARCH 2024**

**PRESENT: COUNCILLOR R J KENDRICK (CHAIRMAN)**

Councillors W H Gray (Vice-Chairman), A J Baxter, A W Briggs, C Matthews, Mrs S A J Nutman, N Sear, T J N Smith and R A Wright

**Added Members**

Church Representative: M Kyle

Parent Governor Representatives: Dr E van der Zee

Councillors Mrs P A Bradwell OBE and S P Roe were also in attendance.

Officers in attendance:-

Linda Dennett (Assistant Director - Children's Health and Commissioning), Tracy Johnson (Senior Scrutiny Officer), Tara Jones (Assistant Director - Children's Safeguarding), Jo Kavanagh (Assistant Director of Early Help), Carolyn Knight (Head of Service - Quality and Standards and Principal Social Worker), Nicky Myers (Interim Head of Service Early Years & Childcare Support), Heather Sandy (Executive Director of Children's Services), Martin Smith (Assistant Director for Children's Education), Emily Wilcox (Democratic Services Officer), Sarah Nardone (Assistant Director - Sector Led Improvement) and Matt Spoons (Head of Service - Education).

61 APOLOGIES FOR ABSENCE / REPLACEMENT MEMBERS

Apologies for absence were received from Councillor M A Whittington.

62 DECLARATIONS OF MEMBERS' INTEREST

None were declared.

63 MINUTES OF THE PREVIOUS MEETING HELD ON 12 JANUARY 2024

**RESOLVED**

That the minutes of the previous meeting held on 12 January 2024 were approved and signed by the Chairman as a correct record.

64 ANNOUNCEMENTS BY THE CHAIRMAN, EXECUTIVE COUNCILLORS AND LEAD OFFICERS

The Chairman was pleased to report that Scrutiny Panel A, which was conducting a review of Young Carers on behalf of the Committee, had received an introductory presentation about Young Carers in Lincolnshire. It was anticipated that the draft final report from Scrutiny Panel A, which would set out its findings and recommendations, would be brought to the meeting on the 18 October 2024 for approval, before being submitted to the Executive for consideration on 5 November 2024.

65 LINCOLNSHIRE SCHOOL PERFORMANCE 2022-23

*During this item, Councillor A Baxter declared a personal interest as his daughters had attended a maintained grammar school.*

Consideration was given to a report by Nicky Myers, Interim Head of Service for Early Years and Childcare Support and Matt Spoons, Head of Service for Schools Standards, which set out the school performance in Lincolnshire for Early Years Foundation Stage, Key Stage 1, Key Stage 2 and Key Stage 4 for the academic year 2022/23, as referenced in the report at pages 15 to 24 of the agenda pack.

Officers were pleased with the results and commended the performance outcomes at all stages of education, however they were not complacent, and highlighted three ongoing projects which would support learning: early reading into KS1, strengthening leadership and SEND leadership development.

Officers were confident that improvements to educational outcomes in Lincolnshire's education settings would continue and were pleased to report that Ofsted outcomes were catching up with national averages.

During the discussion, the following points were recorded:

- Some members expressed disappointment with the high level of data included within the report and wished to see data to support statements to allow an informed judgement to be made. Officers clarified that the format of the report had evolved over time alongside the change in responsibilities with regards to the council's influence of school policies and procedures and curriculum content, as each individual school was now responsible for implementing and analysing its own decisions on curriculum. However, Officers were supportive of including more granular data should the Committee wish to receive it.
- Members raised concerns over reference to grammar schools and their impact the performance of Lincolnshire's education sector. Many members did not support the statements made and expressed caution about the language used, whilst highlighting the importance of encouraging young people with high achievements to stay within

Lincolnshire post education. Officers acknowledged the concerns raised over the language used and would ensure the concerns were reflected going forward.

- It was acknowledged that many young people chose to go to University outside of Lincolnshire, although there were opportunities for apprenticeships and careers within the engineering sector. It was hoped that the medical school would help provide further opportunities.
- The improvements in performance for Early Years Foundation Stage were welcomed.
- Members requested clarity on the comparison between attendance and attainment, which was not clear within the table shown at paragraph g within the report. Officers agreed to provide further explanation in future reports.
- The importance of championing all children no matter whether they attended a grammar school, maintained school or academy was highlighted by the Committee in relation to statements made within the report. Officers provided assurance that the Council would strive to identify and utilise every opportunity provided to support the improvement of both academies and maintained schools.
- The Committee was reassured that many educational settings were evolving with innovative ways to ensure that SEND schools could be well supported and meet the demand within mainstream settings, which was known to lead to better outcomes.
- In terms of performance of the districts at KS2 and KS4, all districts had shown improvement in school performance. A breakdown of the performance for each locality could be provided if requested.
- A targeted list of schools requiring further support had been identified. All activities carried out to support schools were targeted to settings or schools that required it to ensure improvements were made in the right areas.

#### **RESOLVED**

1. That in reviewing the report, assurance be given to the outcomes for Lincolnshire schools for the academic year 2022/23.
2. That schools be commended for the results achieved in 2022/23.
3. That a briefing paper be circulated to the Committee which clarifies points identified in the discussion, including
  - More data to support the statements made around grammar schools and the impact on the performance of Lincolnshire's education Sector
  - A breakdown of performance at district level for KS2 and KS4
  - More data to support the comparison between attendance and attainment.
  - More data to support the evidence statements made around academies vs maintained schools, and & SEND vs non-SEND.

#### 66      SERVICE LEVEL PERFORMANCE REPORTING AGAINST THE SUCCESS FRAMEWORK 2023-24 QUARTER 3

Consideration was given to a report by Jo Kavanagh, Assistant Director – Early Help, which set out the quarter 3 performance in relation to Children's Services, as set out at pages 25 to 36 of the agenda pack.

The Assistant Director – Early Help was pleased to report that out of the seven measures reported, one had exceeded its target, six had achieved their target and there were no measures which had not met the target.

During the discussion the following points were recorded:

- **PI 26 Average time taken to match a child to an adoptive family:** In response to a question raised, it was clarified that there were tolerances set within targets which meant that measures could be recorded as meeting their target despite not meeting the target figure that had been set.
- **PI 45 16-17 year old Children in Care participating in learning:** The council had now recruited to one of the employment coach roles specifically for children in care and the postholder had begun carrying out targeted work in relation to the cohort of children in care who were not participating in learning in an attempt to find work experience placements. The council was still recruiting to the other post.
- **PI 15 Juvenile first time offenders:** It was clarified that a change in the way data was recorded for this measure, so that data was not collected from the police national computer, was due to a national change which had been made by the Youth Justice Board and was out of the council's control. It was felt that over time the change would be helpful as there could be challenges getting police national computer data in a timely manner.

#### **RESOLVED**

That in reviewing the report, satisfaction be recorded for the Children and Young People Service Level Performance for 2023-24 quarter 3.

*11:18am – the meeting adjourned for a short break.*

#### 67 CHILDREN'S SERVICES ANNUAL STATUTORY COMPLAINTS REPORT 2022-23

*11:33am – the meeting reconvened.*

Consideration was given to a report by Carolyn Knight, Head of Service for Quality and Standards, which invited the Committee to consider a report which set out the performance of Children's Services in relation to complaints, as referenced in the report on pages 37 to 52 of the agenda pack.

Officers were reassured that the ongoing investment and work to resolve issues informally where possible had continued to keep the number of complaints low and officers were committed to achieving early resolution. A total of 129 contacts had been received from individuals wishing to complain about the service, of which 27 were resolved informally and only 1.8% of all referrals led to a complaint being made.

During the discussion, the following points were noted:



- Officers said there was not clear reason why there had been a reduction in complaints for quarter 4 but would continue to analyse the data to look for trends.
- The number of contacts received, and complaints made reassured officers that the complaints process was well known, and reports were taken seriously. Members and Officers acknowledged that receiving zero complaints could not be an aspiration whilst ensuring that the complaints process was transparent and accessible.
- Members were encouraged that only 1.8% of all referrals led to a complaint and commended employees within children's service who were seen to be dealing with challenging matters in a sensitive way.
- In relation to the comparison of total social care referrals per district, it was thought that reasons for higher referral rates in some districts could be due to a higher population of children and a higher number of schools in those areas.
- Officers benchmarked complaints data with other councils where possible, however it was acknowledged that it was challenging to make comparisons due to the differences in how complaints were categorised across different authorities.

**RESOLVED**

1. That the Annual Complaints Report for 2022/23 be supported and that the low numbers of complaints that were upheld be noted;
2. That the decrease in the number of formal complaints requiring investigation, despite the additional pressures faced during this period and the increase in complaints across other services, be commended.

68 CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE WORK PROGRAMME

Consideration was given to a report by Tracy Johnson, Senior Scrutiny Officer, which invited the Committee to consider its work programme as set out on pages 95-98 of the agenda pack.

In response to a question, it was clarified that safeguarding concerns in relation to the death of a child in Lincolnshire were reported to the Committee within the annual report from the Lincolnshire Safeguarding Children Partnership which would next be considered by the Committee in September 2024.

**RESOVLED**

That the work programme be agreed

The meeting closed at 11.51 am

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**Open Report on behalf of Heather Sandy, Executive Director - Children's Services**

Report to:	<b>Children and Young People Scrutiny Committee</b>
08 December	<b>19 April 2024</b>
Subject:	<b>Re-commissioning of the Lincolnshire Leaving Care Service</b>

**Summary:**

This report invites the Children and Young People Scrutiny Committee to consider a report on the Re-commissioning of the Lincolnshire Leaving Care Service, which is being presented to the Executive Councillor for Children's Services, Community Safety, Procurement and Migration for a decision between 24 April and 3 May 2024.

The views of the Committee will be reported to the Executive Councillor as part of their consideration of this item.

**Actions Required:**

The Children and Young People Scrutiny Committee is invited to: -

1. Consider the attached report and to determine whether the Committee supports the recommendation(s) to the Executive Councillor for Children's Services, Community Safety, Procurement and Migration as set out in the report.
2. Agree any additional comments to be passed on to the Executive Councillor in relation to this item.

**1. Background**

The Executive Councillor for Children's Services, Community Safety, Procurement and Migration is due to consider a report on the Re-commissioning of the Lincolnshire Leaving Care Service between 24 April and 3 May 2024. The full report to the Executive Councillor is attached at Appendix A to this report.

**2. Conclusion**

Following consideration of the attached report, the Committee is requested to consider whether it supports the recommendation(s) in the report and whether it wishes to make any additional comments to the Executive Councillor for Children's Services, Community

Safety, Procurement and Migration. Comments from the Committee will be reported to the Executive Councillor.

**3. Consultation**

The Committee is being consulted on the proposed decision of the Executive Councillor for Children's Services, Community Safety, Procurement and Migration between 24 April and 3 May 2024.

**4. Appendices**

These are listed below and attached at the back of the report	
Appendix A	Re-commissioning of the Lincolnshire Leaving Care Service to be presented to the Executive Councillor for Children's Services, Community Safety, Procurement and Migration between 24 April and 3 May 2024.

**5. Background Papers**

No Background Papers within section 100D of the Local Government Act 1972 were used in the preparation of this Report.

This report was written by Bridie Fletcher, Senior Commissioning Officer, who can be contacted on 07748 181381 or [bridie.fletcher@lincolnshire.gov.uk](mailto:bridie.fletcher@lincolnshire.gov.uk).

**Open Report on behalf of Heather Sandy, Executive Director for Children’s Services**

Report to:	<b>Councillor Mrs P A Bradwell OBE, Executive Councillor for Children's Services, Community Safety, Procurement and Migration</b>
Date:	<b>24 April to 3 May 2024</b>
Subject:	<b>Re-commissioning of the Lincolnshire Leaving Care Service</b>
Decision Reference:	<b>I030828</b>
Key decision?	<b>Yes</b>

**Summary:**

The Council has a statutory responsibility to provide a Leaving Care Service to eligible children in care (CiC), aged 16 to 25, that are transitioning to adulthood.

Lincolnshire Leaving Care Service (LLCS) is currently provided by Barnardo’s. The contract commenced 1<sup>st</sup> April 2020 and will end 31<sup>st</sup> March 2025 and cannot be extended. The annual value of the contract in 2024/25 is expected to be £1.938m.

Children’s Services has completed a service review (see Appendix A – Commissioning Plan) and this has informed a recommended service model. Commissioning options have been considered and it is recommended that LLCS is insourced and provided by the Council from 1<sup>st</sup> April 2025.

**Recommendation(s):**

The Executive Councillor for Children's Services, Community Safety, Procurement and Migration:

1. Approves the LLCS service model from 1<sup>st</sup> April 2025 as detailed in *Table 6* of this report.
2. Approves the insourcing of the LLCS from 1<sup>st</sup> April 2025 as the delivery model.
3. Delegates to the Executive Director of Children’s Services, in consultation with the Executive Councillor for Children’s Services, Community Safety, Procurement and Migration authority to take all decisions necessary to deliver the recommendations above.

**Alternatives Considered:**

- **Allow the contract to end and decommission LLCS:**  
This is not recommended because it is a statutory requirement for the Council to deliver a Leaving Care Service.
- **Commission LLCS from an external provider:**

Commissioning from an external provider could offer some benefits including lower staffing costs, possible added value through additional funding sources, independent budget control as contract terms could protect more against overspend and independence from the Council. This would also provide continuity of funding to the external market. However, recommissioning also brings the risk of service disruption if the provider changes, reduced flexibility to evolve the service, financial uncertainty because of the challenge of future-proofing costs for the entire contract term, the market place is extremely limited, non-staffing costs are higher, overall the service will cost more and importantly any poor performance could impact on Children's Services Ofsted inspection outcome which in turn could have significant financial and reputational consequences for the Council. This option is not recommended.

#### **Reasons for Recommendation:**

The recommended service model will:

- Provide **clearer information** to care leavers about what support they can get from the LLCS.
- Help CiC to be more **prepared to transition** to leaving care.
- Enhance the **number of Leaving Care Workers (LCW)** to meet growing demand and provide care leavers with more help to plan and move towards independence, including those aged 21+ who will now have an allocated LCW.
- Increase the volume and pay of LCWs to support the **recruitment and retention of skilled staff** that can work with care leavers with more complex needs.
- Meet the **specific needs** of former-Unaccompanied Asylum Seeker Children (UASC) through specialist staff based near to where they live.
- **Increase mental health support** for care leavers so they can live happier and healthier lives and access EET.
- Have an increased focus on care leavers **accessing EET**, with wider support from across the Council.

The reasons for the recommended commissioning option are:

- **Greater flexibility** to evolve service at pace according to meet the changing needs and demands of care leavers. Contractual restrictions can make it more difficult to respond at pace.
- The service will be managed more closely and **strategically led as part of Children's Services**. Insourcing would ensure alignment to our framework and practice models, improving service quality. This should help support the Council's continued high judgement as part of the **Ofsted Inspection** of Local Authority Children's Services.
- LLCS will be more **integrated with other valued Council services** including Children's Services, Public Health, Adult Care and Community Wellbeing. Transition to LLCS and to Adult Care (as required) will be more seamless.
- Indicative budgets indicate a **lower cost** when insourcing the service.
- Staff **recruitment and retention** may be more successful due to the attractiveness of the Council's terms and conditions of employment employees.
- **Greater understanding of performance** reporting including continued use of Mosaic and improved integration of reporting and data quality.

## **1. Background**

A commissioning review of the Lincolnshire Leaving Care Service (LLCS) has been completed. The review considered local and national policy requirements, evidence and needs assessment, stakeholder feedback, the performance of the existing LLCS, benchmarking and market research. The findings of this are set out in the Commissioning Plan at Appendix A.

The current contract with Barnardo's commenced 1<sup>st</sup> April 2020 and will cease on 31<sup>st</sup> March 2025 with no further option of extension. Barnardo's has provided LLCs since 2007, following multiple successful tenders. The LLCs model and funding has evolved over this time to reflect the changing needs and increases in care leavers, particularly former-UASC, and inflationary pressures. The original contract value in 2020/21 was £1,495,000; the annual contract price in 2024/25 is expected to be £1,938,310.

The provision of a Leaving Care Service is a statutory duty of the Local Authority and must meet the requirements of: [Children Act 1989](#), [Children \(Leaving Care\) Act 2000](#), [Children and Young Person's Act 2008](#), [Care Leavers \(England\) Regulations 2010](#) and [Children and Social Work Act 2017](#).

Care leaver eligibility and entitlement is set out below:

Category	Criteria	Entitlement
<b>Eligible</b> <a href="#">Schedule 2, Paragraph 19B, Children Act (CA) 1989</a>	<ul style="list-style-type: none"> <li>Aged 16 or 17</li> <li>Looked after by Children's Services for a period of 13 weeks since the age of 14</li> <li>Currently looked after</li> </ul>	<ul style="list-style-type: none"> <li>A Personal Advisor</li> <li>A Needs Assessment</li> <li>A Pathway Plan</li> <li>Receive all the care and support they normally receive until they leave care</li> </ul>
<b>Relevant</b> <a href="#">Section 23A, CA 1989</a> <a href="#">Section 23B, CA 1989</a>	<ul style="list-style-type: none"> <li>Aged 16 or 17</li> <li>Looked after by Children's Services for a period of 13 weeks since the age of 14</li> <li>Looked after for a period after their 16th birthday</li> <li>No longer looked after</li> </ul>	<ul style="list-style-type: none"> <li>A Personal Advisor</li> <li>A Needs Assessment</li> <li>A Pathway Plan</li> <li>Accommodation and maintenance</li> <li>Financial support to meet EET needs</li> </ul>
<b>Former Relevant</b> <a href="#">Section 23C, CA 1989</a> <a href="#">Section 23CZA, CA 1989</a> <a href="#">Section 23CA, CA 1989</a>	<ul style="list-style-type: none"> <li>Aged between 18 and 25</li> <li>Previously an eligible child and/or a relevant child</li> </ul>	<ul style="list-style-type: none"> <li>A Personal Advisor</li> <li>A Pathway Plan, kept under regular review</li> <li>Assistance with EET</li> <li>Assistance with accommodation</li> <li>Help with living costs</li> </ul>
<b>Qualifying*</b> <a href="#">Section 24, CA 1989</a>	<ul style="list-style-type: none"> <li>Aged between 16 and 25</li> <li>Looked after by Children's Services on, or after, their 16th birthday and no longer looked after</li> <li>Spent less than 13 weeks in care since 14th birthday i.e. do not fulfil criteria for eligible or relevant child</li> </ul>	<ul style="list-style-type: none"> <li>Help with living expenses and if they are in higher education; they may also help with securing vacation accommodation</li> <li>Information, advice and assistance from Children's Services, which may be in cash</li> <li>16-20 year olds are allocated a Personal Advisor but there is no requirement for a Pathway Plan or statutory visits; 21+ year olds may be allocated to a Personal Advisor depending on need</li> </ul>

	<ul style="list-style-type: none"> <li>Looked after by the LA prior to being the subject of an SGO</li> </ul>	
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Table 1 - care leaver categories and service eligibility

- \* Many UASC are not in care long enough by their 18<sup>th</sup> birthday to be entitled to support and are officially 'Qualifying' care leavers. In recognition of this and irrespective of their time in care, all former-UASC care leavers have 'Former Relevant' status to enable full access to support.

### Current Service Model and Performance

Eligible children are allocated a Leaving Care Worker (LCW) shortly after they turn 16: some care leavers are supported solely by their LCW from this point, others are 'twin tracked' with the Social Worker and others may not fully transition to LLCS support until they are 18.

Care leavers access a range of support for EET, suitable accommodation, independent living skills, access to health services, SEND support and 8-weekly update of their Pathway Plan. Care leavers aged 21+ are allocated to a Team Manager but can be reallocated to a LCW for direct support if required; all care leavers can access the Urgent Support Service out of hours.

LLCS has areas of specialist support: former-UASC care leavers are supported with immigration issues, trauma and separation, language and cultural identity; EET and accommodation workers offer targeted advice to both LCWs and young people; and a Mental Health Worker<sup>1</sup> has added significant value to the service. Barnardo's is Ofsted-registered to provide Supported Lodgings which are able to accommodate 16-17 year olds in an assessment bed pending a more permanent placement, though most of the available spaces are for those aged 18+.

Below is a summary of Barnardo's annual performance across the contract:

Key Performance Indicator	Lincolnshire Target	2020-2021 (Q4 JET Data)	2021-2022 (Q4 JET Data)	2022-2023 (Q4 JET Data)	2023-2024 (Q2 JET Data)	Direction of Travel
Care leavers have positive relationships and transition to adulthood	90% for KIT (Tolerance: +/- 5%)	96.5%	96.5%	95.5%	94.5%	↓
% in EET at 16-18 years	Target: 85% (Tolerance: +/- 5%)	65%	60%	55%	44%	↓
% in EET at 19 years <sup>2</sup>	Target: 70% (Tolerance: +/- 5%)	62%	60%	50%	44%	↓
% in EET at 19-21 years	Target: 65% (Tolerance: +/- 5%)	54%	59%	56%	50%	↓
% living in suitable accommodation at 16-18 years	Target: 95% (Tolerance: +/- 5%)	94%	86%	89%	88%	↓

<sup>1</sup> Currently funded through Staying Close grant to 31<sup>st</sup> March 2025

<sup>2</sup> 903 return KPIs used as national comparator (EET at 19, suitable accommodation at 19, Pathway Plans)



% living in suitable accommodation at age 19 <sup>31</sup>	Target: 95% (Tolerance: +/- 5%)	94%	94%	92%	91%	↓
% living in suitable accommodation at 19-21 years	Target: 95% (Tolerance: +/- 5%)	94%	95%	92%	92%	↔
Care leavers have positive sense of identity and are resilient <sup>31</sup>	Target: 90% for Pathway Plans (tolerance +/- 5%)	88%	94%	96%	92%	↓

Table 2 - LLCS KPI summary

Performance reporting has evidenced Barnardo's keep in touch with 98% of Former Relevant care leavers which is better than the England average; Barnardo's also update Pathway Plans within statutory timescales at a better rate. Barnardo's exceeded the national average of care leavers in **suitable accommodation** in 2023 but are 1% below that of statistical neighbours<sup>3</sup>.

The percentage of care leavers in **EET** has been below target for most of the contract across all ages. It should be noted that the care leaver EET figures for England have been around 56% and below for the past 3 years<sup>4</sup>, and this KPI is one of the more complex to resolve. EET engagement is contingent on a range of factors, including accommodation stability, mental health and disability. Former-UASC care leavers have high EET, with 72% of 16–17-year-olds UASC and 67.6% of former-UASC care leavers aged 18-21 accessing some form of EET. There are currently 27 care leavers at university who are supported by the service, including 4 former-UASC care leavers.

The **views of care leavers** are regularly sought to help understand and co-produce areas for service improvement. Care leaver satisfaction with the service is high; 100% of exit plans completed during 2023/24 scored 8+/10. The service also receives regular compliments from both care leavers and multi-agency professionals.

Barnardo's have reported a **higher complexity of need** of care leavers, particularly those entering care at a later age. This impacts on the type and volume of support care leavers need. As a result, LCW's routinely provide support over and above the 8-week statutory visit requirement. There have also been increased safeguarding incidents reported by LLCS, noting a higher presentation of mental health concerns.

In the current LLCS there has been a **high turnover of LCW's**. Barnardo's conducted exit interviews and staff pay was highlighted as a key factor. The service has struggled to recruit staff at the right skill level on the current pay grade to support increasingly complex young people. Team Managers spend a lot of time training LCWs to ensure they can provide the right support. Once up-skilled staff then want to progress to higher paid positions. Barnardo's have tried to recruit LCW posts regularly and have had low interest, often with no candidates passing the short listing or interview processes.

Benchmarking with other Local Authorities' LCW salaries indicates that increased salary costs will need to be considered in any future LLCS model. In the interim, Children's Services has supported Barnardo's to pay existing LCWs a non-recurrent retention payment pro-rata to the end of the contract to broadly align to Council Grade 7.

<sup>3</sup> [Local Authority Interactive Tool \(LAIT\)](#)

<sup>4</sup> National EET figures in England were 53% in 2020, 52% in 2021, 55% in 2022 and 56% in 2023 ([LAIT 24-11-23](#))

## Lincolnshire's Ofsted Performance

In January 2023, Ofsted introduced a new, separate judgement for care leaver services to their inspection framework<sup>5</sup>. Ofsted inspected Lincolnshire Children's Services in April 2023; Lincolnshire was one of the first Local Authorities inspected under the new framework. The overall judgement for Lincolnshire Children's Services was 'Outstanding,' whilst LLCS was judged as 'Good'<sup>6</sup>. There were some key improvements required to LLCS and an Improvement Plan is in place to address this, which also requires significant Council staffing resource to support.

There is a risk to the Council maintaining its overall 'Outstanding' judgement if the LLCS is not providing the highest quality support to care leavers and if demonstrable improvements are not seen rapidly.

Positive feedback included:

- Good outcomes for care leavers in key areas of **relationship-based support** which is bespoke to the young person and support to maintain important networks.
- A good **health offer** e.g., funding for dental treatment; however, this was not widely known by LCWs.
- Access to **specialist support services** such as counselling and CAMHS was seen to be effective. The specialist Mental Health Worker post (funded via Staying Close) was identified as good practice which care leavers spoke about in glowing terms.
- The **participation offer** was also good but could be better publicised, and take-up of activities was therefore sometimes low. The online Local Offer was highlighted as variable across the seven District Councils, but Ofsted could see Leaders are making efforts to unify the offer across the Local Authority area.
- The **EET offer** is valued by care leavers who appreciate the range of support and opportunities available to them.
- LCWs have a sound **understanding of risk** of potential and actual exploitation; all care leavers have a risk assessment and safety plans, but whilst realistic, do not appear to be consistently shared with other professionals.

Areas for improvement included:

- **Allocations and transitions** were insufficiently robust and did not always happen in good time or consistently, with some young people developing relationship with their LCW from 16 years old and other not meeting their LCW until they are 18 at their last care review.
- The **quality of Pathway Plans**; whilst plans are updated within statutory timeframes, they do not always reflect changes in the circumstances of young people and the quality of recording is variable. Some plans lack aspirational language or specificity on how to achieve goals, or related timeframes.
- Support and engagement for **care leavers in custody**. Ofsted observed that attempted support and visits were not always accurately documented by LLCS, who recognise that creative solutions need to be explored to engage this challenging cohort of care leavers.
- Significant development is needed for the **21+ Service**, Ofsted observed that some young people were closed to a LCW at 21 years of age and may have benefited from remaining allocated. Some young people were unsure why they had been stepped down and the decision is sometimes unclear in their case records. Contact with those aged 21+ who are not allocated to a LCW is annual and whilst this is the statutory requirement, Ofsted found Lincolnshire's offer was 'Good' and did not go far enough to achieve a higher judgement.

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<sup>5</sup> [Inspecting Local Authority Children's Services Framework \(ILACS\)](#)

<sup>6</sup> [Lincolnshire's Ofsted Report \(April 2023\)](#)

There were two areas of the framework which Ofsted did not comment on: support for young parents and former-UASC care leavers.

The recommendations from Ofsted relating to LLCS have been considered as part of the commissioning review and form part of the recommended future delivery model.

### Summary of Key Lincolnshire Data

The service review considered a range of evidence and benchmarking data. Key data is summarised below:

- Lincolnshire CiC numbers have increased by 10.5% since 2018<sup>7</sup> compared to c.16% increase nationally.
- 24% of all children that entered care in the 6 months prior to October 2023 were UASC. Overall UASC made up 11.6% of all CiC.
- In October 2023 there were 936 young people eligible for LLCS:
  - 20% (183) were 16-17 years.
  - 30% (286) were 18-21 years.
  - 42% (394) were 21+
  - 8% (73) were recorded as ‘Other’ – these care leavers are age 25.
- 173 care leavers were Eligible, 10 Relevant and 753 Former Relevant (including 145 Qualifying<sup>8</sup> young people).
- 58% of care leavers live in Lincolnshire and 41% live out of county, with 1% whose whereabouts are unknown<sup>9</sup>.
- 2021-22 data (most recent) indicated Lincolnshire care leavers continuing to live with foster carers which is in line with Statistical Neighbours and England.
- 66% of care leavers were male.
- 19% of care leavers had a disability.
- 70% of care leavers were white and 30% are from all other ethnic groups combined.
- In December 2023, 5 Lincolnshire care leavers aged over 18 years were in custody, which has remained broadly the same for the past 4 years<sup>10</sup>.
- In 2023, on average 48% of Lincolnshire care leavers were in EET compared with 58.5% in statistical neighbours and 56% in England<sup>42</sup>. Care leavers engaging in EET is significantly worse than non-care experienced peers. Nationally, 12.3% of all 16-25 years olds were NEET.
- The proportion of care leavers that are former-UASC in October 2023 is below:

Age	% of care leavers that are UASC	Average by cohort
16	23.5%	30.25%
17	37%	
18	36%	24.6%
19	22%	
20	16%	
21	20%	20%

Table 3 - former-UASC care leavers as percentage of wider cohort

<sup>7</sup> 659 Lincolnshire CiC on 31<sup>st</sup> March 2018 (Source: LCC Children’s Services Analysis Tool (ChAT) March 2018)

<sup>8</sup> Qualifying care leavers are not currently separated out from Former Relevant numbers; this has been identified as a reporting issue and is being addressed)

<sup>9</sup> LLCS Q2 2023-24

<sup>10</sup> Average of 4 care leavers in custody; numbers taken from Mosaic as of 31<sup>st</sup> December in 2020, 2021, 2022 and 2023

On average, former-UASC care leavers accounted for c.25% of the total care leaver cohort and this is expected to grow; grant funding from the Home Office for all former-UASC care leavers up to the age of 21 (and to 25 in education) should be utilised proportionately to fund any future model of LLCS.

- UASC numbers have increased since the mandating of the National Transfer Scheme (NTS) in 2021. Between December 2021 and October 2023 there has been a subsequent 40% increase in former-UASC care leavers. UASC numbers will continue to grow as Lincolnshire has not reached the NTS maximum capacity<sup>11</sup> and there are unpredictable future numbers of UASC presenting from asylum hotels, ongoing NTS referrals and the proposed adult asylum centre at RAF Scampton.
- Since the start of the current contract there has been a 21.3% increase in care leavers<sup>12</sup>. Care leaver numbers are predicted to increase further, partly due to higher numbers of CiC, more UASC and as more children are entering care at an older age. This mirrors trend data nationally and for our regional and statistical neighbours<sup>13</sup>.
- Growth projections from Corporate Performance suggest numbers of care leavers could increase by c.7% by April 2025<sup>14</sup>, taking into account the rising numbers of late entrants into care and numbers of former-UASC care leavers. Growth modelling using LAIT data on average cohort increases from 2018 and applying them to forward-looking care leaver projections suggests a possible c.59% increase by the same date:

Care leaver cohort by age	Oct-23 (from ChAT)		Apr-25 (from Corp. Performance)		Apr-25 (from LAIT)	
	CL numbers at Oct 23 <sup>15</sup>	% of whole cohort	Predicted numbers from April 25 <sup>16</sup> (breakdown)	% of whole cohort	Predicted numbers from April 25 <sup>17</sup> (breakdown across cohorts)	% of whole cohort
16–17 year olds	183	19.6%	185	18.4%	286	19.2%
18–20 year olds	286	30.6%	343	34.2%	616	41.3%
21+ year olds	467	49.9%	475	47.4%	589	29.5%
<b>TOTAL</b>	<b>936</b>	<b>100.0%</b>	<b>1003</b>	<b>100.0%</b>	<b>1491</b>	<b>100.0%</b>
<b>Variance to Oct 2023</b>			<b>+7.1%</b>		<b>+59.2%</b>	

Table 4 - care leaver projections to April 2025

However, the LAIT data could be considered somewhat unreliable, due to the anomaly years during the pandemic. The varying projections indicates the lack of certainty in forecasting future numbers and highlights how volatile those figures can be. It is felt the Corporate Performance projections are

<sup>11</sup> 0.1% of the 0-17 child population, which would require Lincolnshire to have min. 144 0–17-year-old UASC in care before we would reach capacity and refuse NTS referrals

<sup>12</sup> LLCS contract report showing Open Allocated Cases i.e. 16–20-year-olds – increased from 394 in April 2020 to 478 in December 2023. Note this excludes Qualifying young people and 21+ year olds

<sup>13</sup> [Local Authority Interactive Tool \(LAIT\)](#)

<sup>14</sup> Increase calculated by forward modelling data taken from the ChAT Oct-23

<sup>15</sup> LCC Children’s Services Analysis Tool (ChAT) October 2023; data includes 73 care leavers categorised as ‘Other’ – these are 25+ year olds who are in scope of reporting due to eligibility for LLCS within the reporting period

<sup>16</sup> Data from Children’s Performance team using October ChAT data as a starting point, incorporating CiC and UASC projections; data also includes 102 care leavers aged of 25+ using the same calculation as the October ChAT for consistency

<sup>17</sup> Data from the LAIT, based on previous annual growth percentages, calculated forward to April 2025 inc 27% increase of former-UASC care leavers, 21% increase in 16-20 year old care leavers and 2.5% increase in 21+ year olds

more reliable at this point, in terms of modelling future service requirements, as these figures have been calculated using our own data over previous years and taken our local trends into account.

Indications are the future LCCS model should consider a base in or close to Peterborough where many former UASC care leavers reside and ensure LCW caseloads account for travel requirements across Lincolnshire and out of area. Although Lincolnshire has not seen increases to CiC to the same extent as other areas there has been a noted growth. It is projected that care leaver numbers will continue to rise. Accurate future forecasting of care leaver numbers is difficult given there are a number of unpredictable variables including late entrants into care and UASC arrivals. Where this relates to UASC, the Council receives grant funding which must be used to proportionately towards the LLCS. Care leaver support needs are similarly difficult to predict. Future modelling needs to be sufficiently flexible to be able to properly resource the service to have capacity to meet both demand and support need.

### Stakeholder Engagement

The Council has engaged with stakeholders as part of the review. In summary, the feedback was:

- Care leavers have said that they like early allocation to their LCW and that this helps them feel independent, and that they value having consistency in their LCW.
- Support after 21 years old is highly valued, though some care leavers have said they would have preferred to be given the choice to remain allocated to the service.
- Mental health support, both direct intervention and a broader range of wellbeing activities, is highlighted as a key area for future service delivery.
- Most authorities deliver their own Leaving Care Service apart from Lincolnshire and Cornwall (part commissioned) in England. Furthermore, many authorities have chosen to insource the service.
- There is not an extensive market of providers across the UK that deliver Leaving Care Services – Barnardo’s is the main supplier.
- Previous procurement indicates low market response and indications are this would be similar during any new tendering opportunity.

### Leaving Care Worker Projections

Based on future care leaver projections, more LCW capacity will be needed from 1<sup>st</sup> April 2025 onwards. In addition, different service models will have an impact of LCW capacity. For example if a LWC is only allocated those aged 21+, they would have a higher caseload than a LCW allocated with only 16-20 year olds because the support offer is different:

Scenario	Care leaver cohort by age	Indicative max caseload per LCW	Oct-23 (from ChAT)			Apr-25 (from Corp. Performance)		
			CL numbers at Oct 23 <sup>18</sup>	% of whole cohort	Optimum no. of LCWs	Predicted numbers from April 25 <sup>19</sup>	% of whole cohort	Optimum no. of LCWs
1	16-20 year olds	20	469	50.1%	23.5	528	52.6%	26.4
	21+ year olds	75	467	49.9%	6.2	475	47.4%	6.3
	<b>TOTAL</b>		<b>936</b>	<b>100.0%</b>	<b>29.7</b>	<b>1003</b>	<b>100.0%</b>	<b>32.7</b>

<sup>18</sup> LCC Children’s Services Analysis Tool (ChAT) October 2023; data includes 73 care leavers categorised as ‘Other’ – these are 25+ year olds who are in scope of reporting due to eligibility for LLCS within the reporting period

<sup>19</sup> Data from Children’s Performance team using October ChAT data as a starting point, incorporating CiC and UASC projections; for consistency, data also includes 102 care leavers aged of 25+ using the same calculation as the October ChAT

2	Total 16-24 year old cohort	23.2	936	100.0%	40.3	1003	100.0%	43.2
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Table 5 - care leaver and LCW projections on 1st April 2025

The above table demonstrates scenarios for LCW numbers based on different modelling approaches:

- **Scenario 1** – caseloads are 20 for LCW’s supporting the 16-20 year old cohort. LCW’s supporting 21+ care leavers have a higher allocation rate of 75. This is based on the DfE New Burdens Assessment in 2018 indicating that c.20% of care leavers aged 21+ would require engagement each week. 1 FTE 21+ LCW, with a caseload of 75, could support 15 care leavers (20% of caseload) for 2.4 hours per week. This scenario should allow for some flexibility for care leavers 21+ to remain allocated to their same LCW based on needs.
- **Scenario 2** – all care leavers aged 16-24 year are allocated based on a caseload of 23.2 care leavers per LCW, which is the average caseload number for benchmarked LAs; all care leavers including 21+ year olds will receive an equal level, or offer, of support. This scenario would provide flexibility and capacity to support 21+ care leaver should they require a more in-depth service offer.

### Recommended Service Model

The table below details the recommended service model that is based on the findings of the commissioning review:

Service element	Preferred model	Difference to current service	Future considerations
<b>Leaving Care Worker (LCW) numbers</b>	The number of LCWs will increase to 33 FTE to respond to the new demand requirements of the service moving forward.  The pay grade of LCWs should be increased to help attract and retain high quality staff.	Increased capacity and better pay for LCWs will lead to higher quality service provision for care leavers, as well as the capacity to respond to any emerging needs of the cohort.	LCWs capacity will need regular review as capacity fluctuates.
<b>Transition</b>	Care leavers will continue to be allocated to LLCS shortly after their 16 <sup>th</sup> birthday; complex young people may be ‘twin tracked’ by both a Social Worker and LCW in preparation for full transition to LLCS at 18 years old.	Increase in LCW capacity will ensure care leavers are consistently allocated early. LCW’s will have more time to build effective relationships and enable a successful transition.	
<b>Pathway Plans</b>	Increased focus on high quality Pathway Planning. The recommended increase in LCWs will ensure that statutory timescales for	Statutory timescales on Pathway Plans are currently being met but increased LCW capacity will further improve	

	completion are met, as well as provide greater capacity to enable workers to update Pathway Plans more frequently as and when circumstances change and will also drive up the quality of those plans and ensure they are meaningful to care leavers.	and enhance both frequency and quality.	
<b>Specialist user groups</b>	Greater capacity for bespoke support for any care leavers that may require more intensive support for a period of time e.g. care leavers in custody, young parents, and disabled care leavers.	Increased capacity in the Leaving Care workforce will allow more intensive support to be delivered in response to changing needs.	
<b>EET</b>	Specialist EET Officers will provide focused support for care leavers to access suitable pre-employment training, qualifications and employment opportunities. Delivery of the Care Leaver Apprenticeship Service (CLAS).	No change recommended to preferred model from April 2025.  However these specialist roles would be further developed to ensure that the right support is provided to care leavers to engage and sustain in EET, working alongside other specialist workers, such as the Mental Health and Accommodation Officers. Officers would be upskilled to ensure that the performance in this area is improved, in line with national targets and comparable with statistical neighbours.	Consider sustainable funding of further EET post that is currently funded through the Staying Close grant to March 2025, subject to DfE decision on continuity of funding.
<b>Information on LLCS Offer</b>	Improved information via updated Local Offer, use of newsletters and other targeted communications; care leavers will have better understanding of their entitlements and where to seek support.	21+ care leavers will be contacted more than the statutory minimum; this will also be informed by the ongoing Improvement Plan	

<b>Mental health &amp; emotional wellbeing support</b>	Increased Mental Health Worker capacity to be permanently funded to up-skill LCWs around mental health and provide some direct intervention and support to access adult mental health services.	Permanently fund mental health support and increase capacity.	Consider sustainable funding of Wellbeing Worker post that is currently funded through the Staying Close grant to March 2025, subject to DfE decision on continuity of funding.
<b>Additional specialist workers</b>	Specialist workers will provide targeted expertise on accommodation, participation and UASC.	No change.	DLT may also want to explore other additional posts that other excelling LAs have invested in.
<b>21+ Service</b>	<p>When care leavers reach age 20 their allocated LCW will commence an assessment to understand and plan support to meet their needs 21+.</p> <p>Where needed, care leavers that require consistency of LCW will remain allocated to their existing LCW. Their LCW will continue to visit and support them as needed until they are ready to transition to an allocated 21+ LCW.</p> <p>For care leavers that have been assessed as able to transition to a stepped down offer, transition planning will commence at age 20 with a new allocated 21+ LCW.</p> <p>21+ LCW's will keep in touch with 21+ care leavers based on their needs this may involve weekly contact for some, visiting care leavers possibly c.3 monthly but as a minimum being in active contact every 6</p>	<p>In the current service model, the majority of 21+ care leavers are allocated to Team Managers, with a relatively small number allocated to an LCW.</p> <p>Developing the service model so that all 21+ care leavers have an allocated worker would provide care leavers with a quality service and is in line with Ofsted feedback.</p> <p>More regular contact would ensure care leavers always had a route back into service and would encourage them to access low level support instead of waiting until crisis point.</p>	



	<p>months and at key times of year e.g. birthdays, Christmas.</p> <p>There will continue to be a Duty service for care leavers to contact in case of emergency.</p> <p>The 21+ offer is the same for Qualifying young people.</p>		
<b>Supported Lodgings</b>	<p>Lincolnshire Supported Lodgings is Ofsted registered as a supported accommodation provider, offering more vulnerable care leavers the opportunity to live in a family setting. Whilst the majority of placements are for 18-21 year olds, there is the option of 16-17-year-olds being placed in an 'assessment beds' as a precursor to an ongoing placement.</p> <p>Supported Lodgings providers are self-employed and are supported by trained staff, along the same principles as Supervising Social Workers.</p>	No change recommended to preferred model from April 2025; this would remain part of the future service model.	

Table 6 – service model

**Recommended Commissioning Option**

Consideration has been given to continuing to externally commission LLCS or to insource it. The Commissioning Plan provides further detail. It is recommended that the Council insources LLCS from 1<sup>st</sup> April 2025.

The cost of externally commissioning LLCS based on the recommended service model is anticipated to be £2,678,930 p/a. The cost of insourcing the service is anticipated to be £2,538,675 p/a; this is £140,255 less. An overview of finances is set out below:

Item	Cost
<b>Total Budget</b>	<b>£ 1, 441,743.00</b>
<b>New Model Cost</b>	
Option 1 Outsourced	£ 2, 678,930.00
Option 2 In-sourced	£ 2, 538,675.00
<i>Variance to cost option 1 compared to 2</i>	<i>-£ 140,255.00</i>
<b>Extra UASC Contribution to Budget*</b>	
Option 1 UASC Contribution @30% + specific costs	£ 866,921.00
Option 2 UASC Contribution @30% + specific costs	£ 860,455.00
<b>Variance to Budget once UASC Contribution Added</b>	
Option 1 Outsourced	<b>-£ 370,266.00</b>
Option 2 Insourced	<b>-£ 236,477.00</b>
<i>Variance to budget Option 1 compared to 2</i>	<i>-£ 133,789.00</i>

Table 7 – budget overview

\*Currently 25% of the Care Leaver cohort is former-UASC care leavers and by 2025 this is expected to be 30%+ and therefore, 30% of the contract cost could be met by the UASC budget (this percentage would flexible and in line with the changing proportion of UASC Care Leavers). Any specific costs, attributed solely to UASC care leavers, such as a premises in Peterborough, would also be met by the UASC budget i.e. funding for an office space in Peterborough. The UASC budget would also be attributed towards the salary for the Head of Service for Leaving Care and Supported Living<sup>20</sup> under the insourced option; savings on the existing staffing budget of £32,593 are being reinvested into LLCS to reduce the cost pressure further. UASC contribution to the LLCS budget would be regularly re-based in line with cohort share.

It should be noted that staffing costs for insourcing do not include annual pay increments. This would equate to c.£66,000 if all staff progress to the next Spinal Column Point. Normally budget managers seek to manage this within existing budgets. It should also be noted though that annual inflationary price increases to a contract (if outsourcing) would also create additional costs e.g. a 3% contract cost increase in Year 2 would equate to c.£80,000.

The final management structure will be subject to further refinement and will be agreed by the Executive Director for Children’s Services in consultation with the Head of Paid Service.

Regardless of whether the service is externally commissioned or insourced, there will be a cost pressure for the Council of at least **£236,477.00 p/a**. The timing of such review means this increased cost has not been captured in the Council’s current medium-term finance plan from 2025/26. This will be reflected in the next Council’s medium-term finance plan update.

The ‘Young People of Lincolnshire’ non-recurrent reserves (former-Connexions budget) has a remaining balance of £151,219, which could be used to off-set the cost related to EET posts for at least the first year of any new service.

If LLCS is insourced, further recurrent savings of c.£99,000 per annum may be possible if existing LCC office space can be utilised to accommodate LLCS staff, with the exception of a Peterborough base.

<sup>20</sup> Assuming Head of Service would be on SLC2 by 1<sup>st</sup> April 2025

Both elements would reduce the cost pressure for an insourced service in year one (2025/26) by up to £250,000, and recurrent cost pressure would be built into medium-term financial planning thereafter.

Additional funding from the Public Health Grant is being explored linked to substance misuse and EET support. Funding towards the Mental Health Workers is also being explored as part of the CYP Mental Health Transformation.

## **2. Legal Issues:**

### Equality Act 2010

Under section 149 of the [Equality Act 2010](#), the Council must, in the exercise of its functions, have due regard to the need to:

- Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act.
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

The relevant protected characteristics are: age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex; and sexual orientation.

Having due regard to the need to advance equality of opportunity involves having due regard, in particular, to the need to:

- Remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic.
- Take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it.
- Encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

The steps involved in meeting the needs of disabled persons that are different from the needs of persons who are not disabled include, in particular, steps to take account of disabled persons' disabilities.

Having due regard to the need to foster good relations between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to tackle prejudice, and promote understanding.

Compliance with the duties in section 149 may involve treating some persons more favourably than others.

The duty cannot be delegated and must be discharged by the decision-maker. To discharge the statutory duty the decision-maker must analyse all the relevant material with the specific statutory obligations in mind. If a risk of adverse impact is identified consideration must be given to measures to avoid that impact as part of the decision-making process.

An Equality Impact Assessment has been completed as part of the service review and, whilst it is an ongoing document, it is included within Appendix A (Commissioning Plan).

Due regard has been taken in the development of the LLCS service model of the need to advance equality of opportunity for care leavers, including those with protected characteristics and to enhance support to them.

Development and implementation of the preferred service model will ensure care leavers have improved access to support, with specialist workers around mental health, accommodation, EET and UASC. Supported Lodgings will be developed as part of the wider accommodation offer for care leavers.

It is not anticipated that there will be adverse impacts to care leavers through the new service model arrangement.

### Joint Strategic Needs Assessment (JSNA and the Joint Health and Wellbeing Strategy (JHWS)

The Council must have regard to the Joint Strategic Needs Assessment (JSNA) and the Joint Health and Wellbeing Strategy (JHWS) in coming to a decision.

The [JSNA](#) includes a number of topic areas that impact on the care leaver cohort in addition to the key topic of **Children in Care (Start Well)**, all of which have been considered as part of the service review:

- Children in the Criminal Justice System (Start Well)
- Mental Health and Emotional Wellbeing (Start Well)
- Schools and Achievement (Start Well)
- Special Educational Needs and Disability (Start Well)
- Alcohol and Substance Misuse (Live Well)
- Employment (Live Well)
- Financial Inclusion (Live Well)
- Homelessness (Live Well)
- Housing Standards (Live Well)
- Mental Health and Emotional Wellbeing (Live Well)
- Sexual Health (Live Well)

The [JHWS](#) has 3 key areas which will have been considered in relation to care leavers:

- **Mental Health and Emotional Wellbeing (Children and Young People) and Mental Health (Adults)**

The recommended model includes sustainable investment in mental health support for care leavers. This will increase LLCS staff's skills to support care leavers with their mental health and provide direct support from qualified mental health practitioners. LLCS will also continue to support care leaver access to other local mental health support within the community and specialist services appropriate to the age and needs of care leavers.

- **Housing and Health**

A core element of LLCS is related to supporting care leavers to live in suitable accommodation. LLCS employs an Accommodation Worker who works with the young people and their Leaving Care Workers to identify appropriate and affordable

accommodation. Care leavers also benefit from strong and effective access NEST (commissioned youth housing service via Nacro), where they can stay until they are 21, and are supported through county-wide Local Connection agreements with all District Councils to ensure access to appropriate housing is maximised. Care leavers in Lincolnshire are also exempt from Council Tax payments with a roll-out of county-wide free prescriptions near completion. LLCS manage the New Homes Grant for care leavers on behalf of the Council, ensuring young people are able to equip their first homes, and also advocate other support including rent gap payments and accommodation support whilst at University. The Council has also worked with Lincolnshire NHS Integrated Care Board to agree free prescriptions for Lincolnshire care leavers.

### Crime and Disorder

Under section 17 of the [Crime and Disorder Act 1998](#), the Council must exercise its various functions with due regard to the likely effect of the exercise of those functions on, and the need to do all that it reasonably can to prevent crime and disorder in its area (including anti-social and other behaviour adversely affecting the local environment), the misuse of drugs, alcohol and other substances in its area and re-offending in its area.

LLCS offers support to vulnerable young people who are at risk of isolation, enabling strong and supportive relationships to be developed that can have a positive impact on outcomes and behaviours.

Care leavers continue to receive support from LLCS whilst they are in custody and the service will continue to support young people who are at risk of committing or experiencing crime and disorder, continuing to work closely with relevant agencies including We Are With You (Turning Point from April 2025), the Probation Service, Youth Offending Service and Future4Me to support young people to make positive choices.

### **3. Conclusion**

The recommended service model will provide an improved offer for Lincolnshire care leavers as set out in the review and will ensure the service is resourced and skilled to meet the needs of the cohort.

The recommended commissioning option to insource LLCS from 1<sup>st</sup> April 2025 will ensure the Council can more flexibly develop the service to meet the needs of care leavers, align practice with other high quality Children's Services and integrate it with other Council services. It is felt this option will deliver the best outcomes for care leavers in Lincolnshire.

#### **1. Legal Comments:**

The proposal to insource LLCS as detailed in this report is within the Council's powers and by virtue of The Local Authorities (Functions and Responsibilities) (England) Regulations 2000 (as amended) is an executive function and within the remit of the Executive Councillors to consider and determine.

## **2. Resource Comments:**

The recommendation in the report to approve Lincolnshire's Leaving Care Service (LLCS) model and insourcing from April 2025 will support an improved offer for Lincolnshire care leavers and ensure it is resourced and skilled to meet cohort requirements.

The insourcing will provide greater flexibilities for the service to adapt to changing needs and demands; be more strategically led within Children's Services and integrated with other Council services. The indicative budget requirements identify a lower cost base for the insourcing model due to operational synergies with existing Council infrastructure, therefore, the recommendation delivering overall better value for money.

The increased resource requirements to respond to the service's needs (increased demands and specialist support) has identified a re-occurring budget shortfall of £0.236m from April 2025. This is following considerations of grant funding.

There are plans to partly manage this cost rise through available reserves in 2025/26, and exploration is taking place on property requirements and opportunities for synergies, along with funding considerations from other Council services. Both options of externally commissioned and insourcing will increase the cost to the Council. This new cost pressure is to be captured within the Council's updated medium-term finance plan from 2025/26 onwards.

## **6. Consultation**

### **a) Has Local Member Been Consulted?**

Not applicable

### **b) Has Executive Councillor Been Consulted?**

Yes

### **c) Scrutiny Comments**

This report will be considered by the Children and Young People's Scrutiny Committee at its meeting on 19 April 2024. The comments of the Committee will be reported to the Executive Councillor.

### **d) Risks and Impact Analysis**

The Commissioning Plan provides more detail of risks for commissioning options. Irrespective of commissioning option, there is a risk of a disruption, either as the service transfers to the Council and is established or if a new provider other than the incumbent is awarded the LLCS contract.

The recommended commissioning option to insource LLCS is considered to have the following additional risks:

- **Initial staff turnover:** there is a risk that current staff may choose not to transfer to the Council, which could have a negative, short-term impact on service delivery. The Council's terms and conditions of employment are likely to be more favourable and so it is expected

most staff would want to transfer. The Council could also commence recruitment to additional posts before 1<sup>st</sup> April 2025.

- **Barnardo’s presence in Lincolnshire could be compromised:** by insourcing the service, this could have an impact on Barnardo’s presence in Lincolnshire’s marketplace. Without a substantial contract of this nature, they could potentially choose not to remain active in Lincolnshire. This may also be an implication if the service was tendered and they were not successful. It may also be a risk regarding the delivery of Supported Lodgings if current providers do not wish to be managed by the Council or the Supported Lodgings Workers do not transfer. This could be commissioned separately but may not be a cost effective proposition to Barnardo’s due to associated management and resource overheads.
- **Current strategic capacity to manage the transfer:** Children’s Services is currently delivering a number of internal transformation programmes as well as nationally important programmes such as Family Hubs and the Families First for Children Pathfinder. The timing of insourcing may not be ideal, and consideration should be given to whether there is sufficient strategic capacity to deliver the programme of work at this time. Children’s Directorate Leadership Team has confirmed agreement with the recommended option.
- **Corporate capacity to project manage the transfer:** the Council will need to identify project capacity to support the transfer i.e. admin (HR including TUPE, payroll and pension, BWON), accommodation, asset transfer etc. Support from Children’s Commissioning will be required during the exit period to maintain oversight of contract KPIs and delivery quality and may be beneficial to provide post-transfer support to the service area until identified elements are operational.
- **Negative association with the Council:** some care leavers may have a negative association with the Council and Social Care and they may choose to disengage with support, however, there should be continuity of LCW and this has not impacted other LAs in their decision to insource the service.
- **Service growth could be more costly:** as the staffing costs for Council staff are likely to be higher, if future service development or expansion is required, it will cost more in staffing than it would if commissioned externally. Furthermore, the service could increase exponentially if not monitored with the same vigour as a commissioned service, which could have a negative impact on the wider Children’s Services budget.

## 7. Appendices

These are listed below and attached at the back of the report	
Appendix A	Commissioning Plan - Lincolnshire Leaving Care Service

## 8. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

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# Commissioning Plan

## Lincolnshire Leaving Care Service



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## 1. Introduction

The Council has a statutory responsibility to provide a leaving care service to eligible children in care (CiC) that are transitioning to adulthood.

In Lincolnshire, Barnardo's is currently commissioned to deliver the Lincolnshire Leaving Care Service (LLCS). The contract with Barnardo's commenced 1<sup>st</sup> April 2020 and will cease on 31<sup>st</sup> March 2025 with no further option of extension.

A commissioning review of the LLCS has been completed and the findings summarised in this Commissioning Plan.

This Commissioning Plan aims to inform decision makers of:

- The key findings of the review
- The recommended model for LLCS from 1<sup>st</sup> April 2025 onwards
- The funding requirements of the recommended model
- The recommended approach for re-commissioning LLCS.

## 2. Current service

### 2.1. Contract overview

Barnardo's has provided the LLCS since 2007 following multiple successful tenders. The LLCS model and associated funding has evolved over this time to reflect the changing needs and volumes of care leavers.

The current annual contract price in 2023/24 is expected to be £1,782,046 and in 2024/25 is expected to be £1,938,310.

Barnardo's have funded additional voluntary contributions to LLCS; as a children's charity they can fundraise and seek additional donations. This is not a contractual requirement. LLCS also currently benefits from access to Barnardo's national training offer and resources. Any future commissioned model must not assume any financial contribution from an external supplier.

It should be noted the Home Office pays the Council a grant towards supporting former Unaccompanied Asylum Seeker Children (UASC)-care leavers which can be apportioned and used towards the LLCS cost for these young people. For those aged under 18 the grant is £114 to £143 per day<sup>1</sup> and for those aged 18 to 21 (25 if in education) it is £270 per week.

The annual cost of the LLCS has increased since the start of the contract due to the rising volume of care leavers (particularly former UASC-care leavers) and associated increased staffing costs as well as inflationary pressures. The Covid-19 Pandemic meant that budgets were underspent in 2020/21 and this underspend has been partly able to offset some pressure in later years but will be fully utilised in 2023/24.

Barnardo's also increased their voluntary contributions, but this will return to the previous level contribution from 1<sup>st</sup> April 2024. The Council has therefore needed to consider a hardship claim from

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<sup>1</sup> In-county arrivals (inc spontaneous presentations and transfers from asylum hotels) are funded at £114 per day; NTS referrals are funded at the higher rate of £143 per day

Barnardo's to ensure the current service can continue to be delivered until the end of the contract. At the time of writing this Commissioning Plan, the claim was being considered. The increased costs are being funded by ensuring appropriate use of the Home Office grant for UASC and have also been built into Council budget planning, as is the case for many other contracts that have seen increased costs.

Separate to the contract funding, Barnardo's also manage a CiC budget of up to c.£700,000 per annum on behalf of the Council for care leaver-related recoverable expenditure such as driving lessons, University costs etc., management of New Home Grants and the Care Leaver Apprenticeship Scheme (CLAS).

Barnardo's also receive grant funding separately to the LLCS contract as part of the [Staying Close Staying Connected](#) programme which is funded by the DfE. The Council was awarded grant funding of £1.3m for 2023 to 2025 and Barnardo's in one of several partners delivering the programme locally. Staying Close is a national model which provides enhanced support to young people leaving care from children's homes (including supported accommodation) and is designed to be a comparable offer to Staying Put, which supports young people in foster care to remain with their former foster carers until age 21. Staying Close provides support with move-on accommodation, a package of practical and emotional support. As of December 2023, DfE have not confirmed if the funding will be renewed after March 2025. Subject to evaluation both nationally and locally, the recurrent funding of relevant posts has been factored into modelling options detailed in *sections 5.1. and 5.2.* and may be subject to further revision.

## 2.2. Service model

Shortly after an eligible CiC young person turns 16, they are allocated a Leaving Care Worker (LCW). For many care leavers their social worker remains their lead professional until they are aged 18 although some have a LCW as their lead professional if appropriate. Other young people may be 'twin tracked' by both a Social Worker and LCW in preparation for full transition to LLCS at 18 years old. Early allocation to a LCW is seen as best practice allowing the young person to build effective relationships before they turn 18<sup>2</sup>.

As part of the core LLCS offer, the role of LCW's includes:

- Working closely with Virtual School to ensure the ePEP (**Personal Education Plan**) is up to date prior to the young person turning 18 to inform future EET support.
- Direct support to Lincolnshire care leavers who are resident in-and out of county with:
  - developing and continual review of their **Pathway Plan** (every 8 weeks until 21+)
  - securing **suitable accommodation** including via the Service's Supported Lodgings scheme
  - accessing **education, employment, or training** (EET) including the Care Leaver Apprenticeship Scheme and higher education options
  - developing **independent living skills** including financial management; help with accessing benefits and financial support; help with life skills; emotional support; and practical support to access other services such as health.
  - accessing maternity and children's **health services**, Early Years Entitlement (EYE) funding towards quality childcare, Children's Centres and Family Hubs, Early Help as relevant for care leavers that are young parents.
  - assisting those with **special education needs and disabilities** (SEND) to meet their specific needs including joint working with Adult Social Care due to ongoing health or support needs.
- Care leavers aged **21+** remain allocated to a LCW based on their need and circumstance; the majority have less intensive support, consisting of access to information, advice and guidance

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<sup>2</sup> [Ready or Not](#)

which is accessed by calling the Urgent Support Service. All 21+ care leavers engaged in education remain allocated to a LCW until they are 25. Care leavers aged 21+ accessed Urgent Support 323 times in 2022-23; the highest percentage of contacts related to accommodation (24%), financial/debt management (14%), New Homes Grant (11%) and welfare checks (9%)<sup>3</sup>.

There are also some specialist enhanced areas of support delivered as part of LLCS:

- Most **former-UASC care leavers** transition to LLCS very close to their 18<sup>th</sup> birthday; the majority arrive in the UK/Lincolnshire aged 16 or 17 and face additional challenges that require bespoke support. As such and given the high and increasing volume of UASC in the care leaver cohort (*see care leaver demographics in 4.1.*) LLCS support their additional needs including:
  - immigration issues
  - language and cultural identity
  - community engagement
  - understanding, assessing risk and supporting young people with their experience of trafficking and exploitation
  - emotional wellbeing support arising from experienced trauma.

Approximately 50% of UASC young people are accommodated with Locate Accommodation, a commissioned regulated supported accommodation provider based in Peterborough. As young people reach adulthood, they often choose to remain in the Peterborough area, close to Locate, for continued support and a known community. Barnardo's operate a LLCS office in Peterborough to support former-UASC care leavers.

- The service employs **EET workers** to provide focussed support for young people to access suitable pre-employment training and qualifications, liaising with colleges and education providers, and go on to support care leavers into employment. LLCS also support the Care Leaver Apprenticeship Service (CLAS).
- The service employs a specialist **Accommodation Worker** who provides expertise on tenancy legislation, housing-related benefits, and local social housing networks and works directly with LCWs to help create accommodation options for their allocated care leavers both in and out of county.
- Barnardo's operate an Ofsted regulated **Supported Lodgings** scheme which is commissioned via the LLCS contract. Supported Lodgings can accommodate 16-17-year-olds in an 'assessment bed' as a precursor to an ongoing placement lasting up to 21 years old. Young people over 18 in Supported Lodgings often have complex needs, meaning they may not be ready to succeed with an independent tenancy or in shared environment such as Youth Housing. As of December 2023, there were 17 approved providers able to offer a Supported Lodging for up to 26 care leavers; one young person of 11 accommodated was under 18 years old.

Many care leavers live in **regulated supported accommodation** (commissioned by the Council) and then move-on accommodation post-18. This helps care leavers with more complex needs better transition to independent living.

Barnardo's work closely in **partnership with the Council** as a result of the statutory service they are commissioned to deliver. Barnardo's input all case records on the Council's Mosaic system, which provides effective oversight and reporting across both organisations. Barnardo's LLCS senior leaders attend Children's Services Quality Assurance Board and reports on LLCS are provided to the Corporate Parenting Panel every six months.

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<sup>3</sup> LLCS Q2 2023-24 JET

Barnardo's undertake the Lincolnshire Safeguarding Children Partnership three-year peer moderated Section 11 safeguarding self-assessment which will be renewed in April 2024. The previous assessment was Green with no identified issues.

Joint training and practice development takes place between social care and LLCS, including safeguarding training, Signs of Safety and [WRAP](#). Barnardo's staff are able to attend Children's Service Team Manager practice meetings and practice lead sessions and can access a range of appropriate training through Lincs2Learn.

### 2.3. Staffing structure

Barnardo's current staffing FTE for LLCS (November 2023) is shown below, along with LCC equivalent grade:

Post	FTE	LCC Grade nearest equivalent 2023-24 inc. on-costs
Programme Manager	1.0	G12
Children's Services Manager <sup>4</sup>	1.0	G11
Team Manager <sup>5</sup>	5.0	G10
Senior Administrator (responsibility for contract reporting, performance and service planning)	1.0	G6
Administrator	6.5	G3/4
Leaving Care Worker PW1	26.6	G3-G6 (up to G7 following retention payment)
Accommodation Specialist PW1	1.0	G6
Supported Lodgings Specialist PW2	2.0	G8
EET Specialist PW3	1.0	G8/9
EET Specialist PW2	1.0	G8
UASC Project Worker PW3	1.0	G8/9
Participation Project Worker PW2	1.0	G8

Table 1: LLCS staffing and LCC grade equivalent (inc. pay awards)

The staffing structure shown costs £1.875m per annum and excludes the posts funded by the Staying Close Staying Connected grant which are fixed term posts to 31<sup>st</sup> March 2025, and sit outside of the LLCS contract.

### 2.4. Contract Performance

Barnardo's keep in touch with 98% of Former Relevant care leavers which is better than the England average; Barnardo's also update Pathway Plans within statutory timescales at a better rate. Below is a summary of Barnardo's annual performance across the contract:

<sup>4</sup> This is a new post that DLT agreed to fund to enhance management capacity; the post will be in place from Dec-23 to the end of the contract in Mar-25

<sup>5</sup> This includes 0.8FTE which DLT have recently agreed (Nov-23) as further enhancement to staffing capacity

Key Performance Indicator	Lincolnshire Target	2020-2021 (Q4 JET Data)	2021-2022 (Q4 JET Data)	2022-2023 (Q4 JET Data)	2023-2024 (Q2 JET Data)	Direction of Travel
Care leavers have positive relationships and transition to adulthood	90% for KIT (Tolerance: +/- 5%)	96.5%	96.5%	95.5%	94.5%	↓
% in EET at 16-18 years	Target: 85% (Tolerance: +/- 5%)	65%	60%	55%	44%	↓
% in EET at 19 years <sup>6</sup>	Target: 70% (Tolerance: +/- 5%)	62%	60%	50%	44%	↓
% in EET at 19-21 years	Target: 65% (Tolerance: +/- 5%)	54%	59%	56%	50%	↓
% living in suitable accommodation at 16-18 years	Target: 95% (Tolerance: +/- 5%)	94%	86%	89%	88%	↓
% living in suitable accommodation at age 19 <sup>31</sup>	Target: 95% (Tolerance: +/- 5%)	94%	94%	92%	91%	↓
% living in suitable accommodation at 19-21 years	Target: 95% (Tolerance: +/- 5%)	94%	95%	92%	92%	↔
Care leavers have positive sense of identity and are resilient <sup>31</sup>	Target: 90% for Pathway Plans (tolerance +/- 5%)	88%	94%	96%	92%	↓

Table 2 – LLCS KPI summary

Barnardo's exceeded the national average of care leavers in **suitable accommodation** in 2023 but are 1% below that of statistical neighbours<sup>7</sup>.

The percentage of care leavers in **EET** has been below target for most of the contract across all ages. It should be noted that the care leaver EET figures for England have been around 56% and below for the past 3 years<sup>8</sup>, and this KPI is one of the more complex to resolve. EET engagement is contingent on a range of factors, including accommodation stability, mental health and disability.

Former-UASC care leavers have high EET, with 72% of 16–17-year-olds UASC and 67.6% of former-UASC care leavers aged 18-21 accessing some form of EET. There are currently 27 care leavers at university who are supported by the service, including 4 former-UASC care leavers.

As of December 2023, there were 8 young people engaged in CLAS through a variety of employment options.

## 2.5. Qualitative performance

The views of care leavers are regularly sought to help understand areas for service improvement. A summary of feedback relating to the existing LLCS is below:

<sup>6</sup> 903 return KPIs used as national comparator (EET at 19, suitable accommodation at 19, Pathway Plans)

<sup>7</sup> [Local Authority Interactive Tool \(LAIT\)](#)

<sup>8</sup> National EET figures in England were 53% in 2020, 52% in 2021, 55% in 2022 and 56% in 2023 ([LAIT](#) 24-11-23)

- **You Said We Did** quarterly returns have shown a range of actions following feedback from care leavers including setting up participation groups including for LGBTQ+ care leavers, activities for young people including sports club access for former-UASC care leavers, opportunities to engage with national research, life skills activities etc.
- **Participation** with care leavers has been a significant focus of the LLCS, with a designated participation officer ensuring co-production throughout the service. Barnardo's have developed 8 care leaver-led transformation groups looking at different aspects of service delivery including engagement and communications. The participation offer continues to develop and be strengthened, ensuring that care leavers have a voice and an input into service delivery; Barnardo's also facilitate Lincolnshire care leavers to contribute to national conversations about their experiences.
- **Exit plans** completed during 2023-24 highlight that care leavers rate the quality of support very highly with 100% of scores 8+ out of 10.
- **Compliments** are recorded from both professionals and care leavers, though due to inconsistencies in recording there are low volumes. Care leavers that have responded have fed back how much they value their LCW and the level of support offered, and this is backed up by stakeholders including police and health colleagues, NACRO, foster carers etc who have mentioned the high level of support to young people, as well as the Council's Head of Service for Leaving Care and Supported Living has singled out a number of workers for effective practice and support.

*My life would have been very different if Barnardo's had not been a part of it. I would not have been able to accomplish as many great things as I have. At the time, getting through everything would have been challenging financially and emotionally. I do not even like to consider what life would have been like without them, since I know it would not have been the same. The gratitude I feel towards them will last a lifetime.*

Care leaver, March 2023

Barnardo's have developed effective relationships with Council colleagues and other relevant statutory and commissioned services such as the ICB, youth housing and supported accommodation providers, DWP, substance misuse services and mental health services; there is a dedicated Mental Health Worker employed by Lincolnshire Partnership NHS Foundation Trust, which is now funded through the Staying Close programme, which is having a positive impact for care leavers.

## 2.6. Concerns raised in the current service

Area of concern	Description	Consideration in future LLCS
Transition protocols	Barnardo's audits identified transition protocols are not completed consistently in good time. A new transition protocol is being implemented with LCWs.	<p>Transition planning is highly important and is one of the key findings from national research (see 3.1.).</p> <p>There must be sufficient LCW capacity to support this and there may be benefit in considering a specialist role or team.</p> <p>Nottinghamshire County Council have a Transitions Service that work</p>



		with the most complex young people where it has been identified that a successful transition to leaving care may be unlikely; Nottinghamshire suggested that their Transition Service has saved over £1.5 million in specialist placements.
Quality and performance	Barnardo's have had access to Mosaic for a number of years but have only recently been able to stop recording on their own content server system. Whilst here has been a significant effort and programme of works from both Barnardo's and the Council's Mosaic team to develop worksteps and cleanse data in the past few years, there remain some inconsistencies in data.	If the service continues to be provided by an external supplier reporting on Mosaic will continue to be important and the Council will need to ensure support is available for data transfer, as relevant, as well as ongoing support in data input, data accuracy, staff training and reporting.
Staffing	<p>In the current LLCS there has been a high turnover of LCW's. Barnardo's conducted staff consultations and exit interviews and low wages for LCW's was highlighted as a key factor. In 2021/22, 10 staff members (nine LCW) left LLCS; six left for higher paid posts in local authorities (including the Council) and two were promoted to other posts in Barnardo's.</p> <p>The service has struggled to recruit staff at the right skill level on the current pay grade to support increasingly complex young people. Barnardo's have tried to recruit LCW posts regularly and have had low interest, often with no candidates passing the short listing or interview processes. The turnover of staff has an impact on the following:</p> <ul style="list-style-type: none"> <li>• Stability of worker and care leavers needing to repeat lived experiences to multiple professionals</li> <li>• Capacity for allocation; new staff do not have a full caseload during 6-month induction</li> <li>• Recruitment process and induction which requires Team Managers capacity</li> </ul>	The Council must ensure funding is adequate for the LLCS and build in a contractual mechanism as necessary for inflationary increases.

	<ul style="list-style-type: none"> <li>• Capacity of Leaving Care Workers to buddy new workers</li> <li>• Quality of service which had a potential impact on Ofsted grading.</li> </ul> <p>Benchmarking with other Local Authorities' LCW salaries indicates that increased salary costs will need to be considered in any future LLCS model:</p> <ul style="list-style-type: none"> <li>• Surrey – av. £32,798 p/a (LCC G8)</li> <li>• Stockport - £30,151 to £34,723 (LCC G8)</li> <li>• Manchester City - £28,900 to £32,020 (LCC G7)</li> <li>• Essex - £29,741 to £34,001 (LCC G7/8)</li> <li>• Peterborough City - £27,852 to £31,099 (LCC G6/7)</li> </ul> <p>LCWs in Lincolnshire have been paid across a range of Council Grade 3-6 equivalent.</p> <p>The level and experience of staff recruited to LCW posts in Lincolnshire has meant Team Managers spend a lot of time training, coaching, mentoring and overseeing LCWs to ensure they can provide the right support for young people. Once up-skilled staff then want to progress to higher paid positions. As such, Children's Services has supported Barnardo's to pay existing LCWs a non-recurrent retention payment pro-rata to the end of the contract to broadly align to Council Grade 7. This is the same rate as Early Help Workers, which are considered comparable roles.</p>	
Complexity of young people's needs	Barnardo's have noted an increase in the complexity of needs of care leavers, particularly those entering care at a later age. The Council's Social Workers also recognise higher complexity. This impacts on the type and volume of support care leavers need. As a result, LCW's routinely provide support over and above the 8-week statutory visit requirement.	LCW caseload capacity needs to factor in complexity of needs. Sustainable funding of a dedicated mental health support for care leavers needs to be identified.

	There have also been increased safeguarding incidents reported by LLCS, noting higher presentation of mental health concerns.	
EET	<p>Following an audit on EET performance Barnardo’s note the following factors in impacting care leavers engagement:</p> <ul style="list-style-type: none"> <li>• Unsuitable and unstable accommodation</li> <li>• Poor mental health</li> <li>• SEND e.g. ADHD and autism</li> <li>• Substance misuse</li> <li>• Criminal record</li> <li>• Other factors including childcare and immigration status.</li> </ul> <p>Barnardo’s previously employed a specialist EET Champion and a Wellbeing Worker to help care leavers overcome barriers to EET. Both posts are now funded through the Staying Close programme to the end of the contract period.</p>	<p>LLCS EET offer needs to be strengthened to support care leavers’ engagement, with a multi-faceted and holistic approach that identifies the many relevant factors. Nottinghamshire County Council have an extensive EET offer which has had a positive impact on KPIs.</p> <p>Whilst suitable and sustainable accommodation is the key factor, poor mental health and substance misuse play a significant role in readiness to engage.</p> <p>Sustainable funding of dedicated mental health and substance use support for care leavers needs to be identified.</p>

Table 3 – areas of concern

## 2.7. Lincolnshire’s Ofsted performance

In January 2023 Ofsted introduced a new, separate judgement for care leaver services to their inspection framework<sup>9</sup>. Ofsted inspected Lincolnshire Children’s Services in April 2023; Lincolnshire was one of the first Local Authorities inspected under the new framework. The overall judgement for Lincolnshire Children’s Services was ‘Outstanding,’ whilst LLCS was judged as ‘Good’<sup>10</sup>. There were some key improvements required to LLCS and a program of work is in place to address this. The recommendations from Ofsted relating to LLCS have been considered as part of the commissioning review and form part of the recommended future delivery model.

Positive feedback included:

- Good outcomes for care leavers in key areas of **relationship-based support** which is bespoke to the young person and support to maintain important networks.
- A good **health offer** e.g., funding for dental treatment; however, this was not widely known by LCWs.
- Access to specialist support services such as **counselling and CAMHS** was seen to be effective. The specialist Mental Health Worker post (funded via Staying Close) was identified as good practice which care leavers spoke about in glowing terms.
- The **participation offer** was also good but could be better publicised, and take-up of activities was therefore sometimes low. The online Local Offer was highlighted as variable across the seven

<sup>9</sup> [Inspecting Local Authority Children’s Services Framework \(ILACS\)](#)

<sup>10</sup> [Lincolnshire’s Ofsted Report \(April 2023\)](#)

District Councils, but Ofsted could see Leaders are making efforts to unify the offer across the Local Authority area.

- The **EET offer** is valued by care leavers who appreciate the range of support and opportunities available to them.
- LCWs have a **sound understanding of risk of potential and actual exploitation**; all care leavers have a risk assessment and safety plans, but whilst realistic, do not appear to be consistently shared with other professionals.

Areas for improvement included:

- **Allocations and transitions** were insufficiently robust and did not always happen in good time or consistently, with some young people developing relationship with their LCW from 16 years old and other not meeting their LCW until they are 18 at their last care review.
- The **quality of Pathway Plans**; whilst plans are updated within statutory timeframes, they do not always reflect changes in the circumstances of young people and the quality of recording is variable. Some plans lack aspirational language or specificity on how to achieve goals, or related timeframes.
- Support and engagement for **care leavers in custody**. Ofsted observed that attempted support and visits were not always accurately documented by LLCS, who recognise that creative solutions need to be explored to engage this challenging cohort of care leavers.
- Significant development is needed for the **21+ Service**, Ofsted observed that some young people were closed to a LCW at 21 years of age and may have benefited from remaining allocated. Some young people were unsure why they had been stepped down and the decision is sometimes unclear in their case records. Contact with those aged 21+ who are not allocated to a LCW is annual and whilst this is the statutory requirement, Ofsted found Lincolnshire's offer was 'Good' and did not go far enough to achieve a higher judgement.

There were two areas of the framework which Ofsted did not comment on: support for young parents and former-UASC care leavers.

## 2.8. Post-Ofsted

There is a risk to the Council maintaining its overall 'Outstanding' judgement if the LLCS is not providing the highest quality support to care leavers and if demonstrable improvements are not seen rapidly. Ofsted will expect improvement to be demonstrated as part of the Council's annual conversation in February 2024.

Barnardo's and the Council have agreed an Improvement Plan to be delivered as part of the current contract, which has been signed off by DLT. This is being monitored as part of the CiC Transformation Programme and governance is via the Children's Quality Assurance Board. DLT has also agreed to fund some fixed-term leadership capacity in Barnardo's to oversee delivery of the service improvements.

There is significant Council resource involved in supporting the Improvement Plan and ongoing LLCS service delivery i.e. the Head of Service for Leaving Care and Supported Living and the Corporate Parenting Manager, Children's Strategic Commissioning, Children's Finance, Mosaic and a Practice Advisor from the Quality and Standards team who is supporting Barnardo's with quality audits and practice developments. The improvements to LLCS will directly inform the recommended future model in this Commissioning Plan.

### Summary of Key Findings – Current Service

- Barnardo's has delivered LLCS since 2007. As a national charity they have brought added value to the contract, including financial contributions, but supplier contribution cannot be relied on in any future LLCS model.
- The current contract cannot be extended and the Council must decide on the recommissioning of LLCS.
- Since the current contract started, care leaver numbers have risen. There has been a significant increase in former-UASC care leavers. Home Office grants can be used to fund LLCS for these young people. Going forward financial investment from the grant must be flexible to ensure proportionate funding.
- The cost of running LLCS has increased since the start of the contract and the original contract budget has not been sufficient to fund the service.
- There have been challenges in recruiting and retaining quality experienced staff, with many moving on to higher paid roles, which will have impacted service performance and stability for care leavers. Pressures on contract funding and growing demand has meant Barnardo's have been unable to pay staff at a higher rate. The Council has responded to this by increasing funding non-recurrently (including the consideration of hardship funding) but there needs to be a recurrent budget increase to ensure the right staff are employed and retained.
- Barnardo's contact with care leavers, completion of pathway plan reviews and those in suitable accommodation is better than the England average but overall contract performance has shown decline since the contract started, most notably a reduction in care leavers in EET. Barnardo's have tried to respond by putting in additional targeted staffing but they report a higher complexity of care leavers which is impacting on their engagement in EET.
- EET engagement is a priority for the LLCS in 2024 and beyond. Nationally, EET engagement has fluctuated considerably post pandemic. Some areas, including Nottinghamshire, have made impressive improvements as a result of having clear strategies and increased investment in EET specialists.
- Care leavers themselves generally have a positive view of LLCS. The KPI's that relate to human experience, relationships, and how the care leavers feel about themselves score highly, despite small declines over the life of the contract. Barnardo's encourage care leavers to have a say about LLCS improvements. The creation of specialist groups and events are the result of listening to care leavers and what they need from the service.
- Whilst Ofsted judged the LLCS to be 'good', there were notable areas identified for improvement including transitions and allocation, the 21+ service offer, the quality of pathway plans and engagement with those in custody. A poor Ofsted inspection for LLCS risks the Council's overall inspection being downgraded. A comprehensive Improvement Plan in response to the findings of the Ofsted report is in progress.
- Barnardo's have a close partnership relationship with the Council; recording on the Council's Mosaic system, attending Council Boards and Committees, joint continued professional development, joint quality assurance. Despite being an externally commissioned service, Barnardo's have worked collaboratively with other public service providers to wrap relevant support and care around young people.
- LLCS has numerous specialist officers who support with advice, guidance, and up-skilling of staff in areas such as EET, accommodation, mental health, and participation. This is recognised as best practice by Ofsted.
- Care leavers are benefitting from enhanced support funded by the Staying Close Staying Connected DfE grant, which is not part of the LLCS contract. The programme provides mental health, wellbeing, substance misuse, and practical support for Lincolnshire care leavers and has been well received

locally by professionals and young people, as well as Connective Workers who will support care leavers resident out of county to identify and remain close to their support networks or consider a return to Lincolnshire. At the point of writing this commissioning plan, the DfE have not confirmed if the programme will continue to be funded beyond the current contract period. The Council will need to decide if posts should continue to be funded as part of the future service should the DfE cease the grant entirely.

### 3. Statutory duties, policy background and local priorities

LLCS is a statutory service that supports the Council to meet its **legal responsibilities** to care leavers aged 16 to 25 years old, regardless of where they are living, including:

Category	Criteria	Entitlement
<b>Eligible</b> <a href="#">Schedule 2, Paragraph 19B, Children Act (CA) 1989</a>	<ul style="list-style-type: none"> <li>Aged 16 or 17</li> <li>Looked after by Children’s Services for a period of 13 weeks since the age of 14</li> <li>Currently looked after</li> </ul>	<ul style="list-style-type: none"> <li>A Personal Advisor</li> <li>A Needs Assessment</li> <li>A Pathway Plan</li> <li>Receive all the care and support they normally receive until they leave care</li> </ul>
<b>Relevant</b> <a href="#">Section 23A, CA 1989</a> <a href="#">Section 23B, CA 1989</a>	<ul style="list-style-type: none"> <li>Aged 16 or 17</li> <li>Looked after by Children’s Services for a period of 13 weeks since the age of 14</li> <li>Looked after for a period after their 16th birthday</li> <li>No longer looked after</li> </ul>	<ul style="list-style-type: none"> <li>A Personal Advisor</li> <li>A Needs Assessment</li> <li>A Pathway Plan</li> <li>Accommodation and maintenance</li> <li>Financial support to meet EET needs</li> </ul>
<b>Former Relevant</b> <a href="#">Section 23C, CA 1989</a> <a href="#">Section 23CZA, CA 1989</a> <a href="#">Section 23CA, CA 1989</a>	<ul style="list-style-type: none"> <li>Aged between 18 and 25</li> <li>Previously an eligible child and/or a relevant child</li> </ul>	<ul style="list-style-type: none"> <li>A Personal Advisor</li> <li>A Pathway Plan, kept under regular review</li> <li>Assistance with EET</li> <li>Assistance with accommodation</li> <li>Help with living costs</li> </ul>
<b>Qualifying*</b> <a href="#">Section 24, CA 1989</a>	<ul style="list-style-type: none"> <li>Aged between 16 and 25</li> <li>Looked after by Children’s Services on, or after, their 16th birthday and no longer looked after</li> <li>Spent less than 13 weeks in care since 14th birthday i.e. do not fulfil criteria for eligible or relevant child</li> <li>Looked after by the LA prior to being the subject of an SGO</li> </ul>	<ul style="list-style-type: none"> <li>Help with living expenses and if they are in higher education; they may also help with securing vacation accommodation</li> <li>Information, advice and assistance from Children’s Services, which may be in cash</li> <li>16-20 year olds are allocated a Personal Advisor but there is no requirement for a Pathway Plan or statutory visits; 21+ year olds may be allocated to a Personal Advisor depending on need</li> </ul>

Table 4 – care leaver categories and service eligibility

\* Many UASC are not in care for long enough by their 18<sup>th</sup> birthday to be entitled to support and are officially ‘Qualifying’ care leavers. In recognition of this and irrespective of their time in care, all former-UASC care leavers have ‘Former Relevant’ status to enable full access to support.

The following **policies** have been considered and integrated into the recommended future model within this Commissioning Plan:

- The [Children \(Leaving Care\) Act 2000](#) introduced the requirements on Local Authorities to assess the needs of young people as they leave care, appoint a Personal Adviser<sup>11</sup> to support them until they turn 18 (or to 21 if in education), and develop a Pathway Plan.
- The [2008 Children and Young Person's Act](#) introduces provision for Local Authorities to provide additional support to care leavers in education, including a £2000 bursary per year for those in higher education and extended Leaving Care Worker (LCW) support to 21 for all young people and to 25 if in education.
- [Care Leavers \(England\) Regulations 2010](#) sets out the comprehensive elements of support to enable young people make the successful transition to independence.
- [The Care Leavers Charter 2012](#) identified six key pillars of support: identity and aspiration, listening to care leavers' views, support when needed, providing information, finding care leavers a home, and working together.
- The [Children and Family Act 2014](#) introduced the 'Staying Put' duty which supports care leavers to remain with their foster carers to the age of 21 where both parties wish the arrangement to continue.
- The principles of the Government's 2016 [Keep on Caring Strategy](#) recognise the importance of supporting care leavers to be better prepared and supported to live independently, have improved access to education, training and employment experience stability and feel safe and secure, have a stable place to live, have improved access to health support, and have financial stability. The resulting [Care Leaver Covenant](#) sets out the national commitment to care leavers.
- The [Children and Social Work Act 2017](#) sets out the duties that Local Authorities have to care leavers. Local Authorities have a duty to publish a Local Offer, detailing services that they offer to care leavers that may assist care leavers in, or in preparing for, adulthood and independent living. This includes health and wellbeing, relationships, education and training, employment, accommodation, and participation in society. Care leavers are also able to access support up to the age of 25, regardless of whether they are in education or not, and further requires Local Authorities to have regard to the seven corporate parenting principles<sup>12</sup>:
  1. To act in the best interests, and promote the physical and mental health and wellbeing, of those children and young people.
  2. To encourage those children and young people to express their views, wishes and feelings.
  3. To consider the views, wishes and feelings of those children and young people.
  4. To help those children and young people gain access to, and make the best use of, services provided by the Local Authority and its relevant partners.
  5. To promote high aspirations, and seek to secure the best outcomes, for those children and young people.
  6. For those children and young people to be safe, and for stability in their home lives, relationships and education or work.
  7. To prepare those children and young people for adulthood and independent living.
- In addition, the [Immigration Act 2016](#) and the [Care of Unaccompanied Migrant Children and Child Victims of Modern Slavery \(2017\) guidance](#) state that former Unaccompanied Asylum-Seeking Children (UASC) who qualify as care leavers and who have been granted leave to remain, or who

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<sup>11</sup> Lincolnshire use the term Leaving Care Worker (LCW), which is used in the Commissioning Plan from this point

<sup>12</sup> [Applying corporate parenting principles to looked-after children and care leavers](#)

have an outstanding asylum or other human rights claim or appeal, are entitled to the same level of care and support from the Local Authority as any other care leaver.

Several **national improvement programmes** may have an impact on future national policy changes following evaluation of outcomes delivered, and are already driving local LLCS improvements:

- [Families First for Children \(FFC\)](#)
- [Rough Sleeping Funding Grant](#)
- [Staying Close Staying Connected Grant](#)

National policy has further informed important **local strategies** which have a focus on Children in Care (CiC) and care leavers:

- [Early Help Strategy 2021-23](#)
- [Early Childhood Strategy 2020-24](#)
- [Joint Strategic Needs Assessment \(JSNA\)](#)
- [Joint Health and Wellbeing Strategy](#)
- [Lincolnshire High Needs Strategy](#)
- [Lincolnshire SEMH Strategy](#)
- [Participation Strategy 2023-26](#)
- [Lincolnshire Local Transformation Plan for Children and Young People's Emotional Wellbeing and Mental Health](#)
- [Children in Care and Care Leaver Strategy 2022-25](#)
- [Children in Care Sufficiency Strategy 2023-27](#)

As stated in the [Children in Care and Care Leaver Strategy 2022-2025](#):

*It is the ambition of Lincolnshire County Council for our children and young people in or leaving care to be safe, happy, and healthy, to enjoy life and realise their potential. Where they are provided with a safe and dependable foundation from which they can grow and achieve as this offers every child who has had a difficult start, the promise of a brighter future, with every prospect of success. We will provide them with high quality care, support, and guidance to ensure that they get the opportunities they deserve, as we know the highest quality of social care can transform the life chances of the most vulnerable children in Lincolnshire. Through relationship-based interactions, we will give them the support they need to be resilient and well prepared for adulthood and independence.*

The future LLCS will also continue to contribute to and be a key part of the local **Children in Care (CiC) transformation programme** which builds on the social care improvements proposed in the Government's implementation and strategy document, [Stable Homes, Built on Love](#) (2023), which sets out six key pillars that aim to reform children's social care. The Council's CiC transformation programme seeks to develop and improve our current understanding of and future planning for CiC and aims to provide family environments for CiC to live where possible- stepping down residential placements, particularly out of area, to provide more targeted wraparound support from other local services. The transformation programme is important in helping to shape services for CiC and has direct implications for what a future leaving care service should offer.

The Council is also leading a **Children and Young People's Mental Health transformation programme** on behalf of Lincoln Integrated Care Board (ICB) and in partnership with Lincolnshire Partnership NHS Foundation Trust (LPFT) who provide many children's mental health services locally. The programme vision is that, together with children and young people in Lincolnshire, we will understand how we can best support their emotional wellbeing and mental health and transform and improve services enabling



CYP to live independent, safe, well and fulfilled lives in their local communities. There are several existing targeted services that support CiC and care leavers with their mental health, recognising the impact of experienced trauma and the higher prevalence of mental illness in care experienced children. These services are part of the transformation programme. The views of care experienced children and the professionals working with them is helping to inform what future services need to offer including how they should integrate with any future LLCS.

### 3.1. Evidence Summary

It is important to understand available evidence on what can improve outcomes for care leavers and embed this into the future LLCS; a summary of findings is set out below.

#### **Transition:**

Information in Ofsted's 2022 report [Ready or Not](#) highlights the importance of carefully planned twin tracking of children from aged 16 to 18 and the importance of planned transition work to prepare care leavers for adulthood.

#### **Education, employment and training (EET):**

The [evaluation of the Care Leavers Social Impact Bond \(SIB\) programme](#) (2023) highlighted that supporting care leavers' stability and wellbeing was a key foundation for achieving EET outcomes based on four areas of stability and wellbeing outcomes: when a care leaver agreed education and training was right for them; had at least one consistent relationship; felt safe; and managed their accommodation and costs. The study also highlighted the importance of consistent, skilled and knowledgeable support was a key enabler in engaging care leavers (and maintaining their engagement) in the EET programme.

#### **Mental health:**

The 2020 report [What Makes Life Good](#) showed that 30% of care leavers experience low wellbeing and that 26% of care leavers aged 16–34 reported low life satisfaction compared to just 3% of the general population of the same age. This is in line with other research studies that have produced data showing that care leavers mental health is worse than that of the general population.

[An exploratory study of the emotional wellbeing needs and experiences of care leavers in England](#) (2023) highlights the issues faced by care leavers and professionals when supporting young people's emotional wellbeing. The report recommends dual support (practical and mental health), improving the quality of that support, the importance of Leaving Care Workers, and using data collection and monitoring as ways to support care leavers' mental health needs.

[What Works for Children's Social Care – emotional wellbeing needs and experiences of care leavers](#) (2023) highlighted the disparity and variation in mental health support for care leavers, though positive relationships between Leaving Care Workers and care leavers are vital in providing additional support through relationships and facilitating access to services.

The 2022 ONS article '[Half a million more people are out of the labour force because of long-term sickness](#)' details how work absence due to mental ill health has risen 22% from April/June 2019 to April/June 2022, which the researchers suggest may be as a result of post-Covid change.

### Care leavers in custody:

[HMP Care Experience Matters](#) (2023) suggests beneficial practice for prisons, probation, and Local Authorities to provide consistent and appropriate support for people with care experience whilst they are in prison, upon release, or under community supervision.

### Health and wellbeing:

[The lifelong health and well-being of care leavers](#) (Nuffield Foundation, 2021) recommends that the placement of CiC should prioritise their long-term well-being, necessitating commitment across Children's Social Care and Family Justice systems. Policies must consistently consider the unique needs of care leavers, addressing substantial health, education, and employment disparities in adulthood. State intervention to protect a child should entail a lifelong commitment, with all public services attuned to the additional needs of care leavers.

[Care leavers – a hidden health inequality](#) (BMJ, 2022) advocates that growing up in care increases the likelihood of poor health later in life up to fourfold compared to those raised by parents. Leaving care leads to social and health exclusion, with a higher prevalence of psychiatric diagnoses. It highlights the NHS Care Experienced Peer Group and NHS England's commitment to the [Care Leavers Covenant](#) as steps toward addressing health inequalities for this vulnerable group.

### Care leavers who are parents:

Young participants in the [Teenage children of mothers who experienced out-of-home care: How are they doing?](#) (evidence from the UK Millennium Cohort Study, Nuffield Foundation, 2022) project emphasised that the life circumstances of care leavers create challenges predisposing them to health problems. Their experiences of early independence without typical family resources, financial constraints, and ongoing stress contribute to health issues. Stigma, lack of support, and disrupted health literacy worsen their challenges, making them more likely to need help but less likely to know how to seek it. They expressed encountering a lack of understanding and empathy, exacerbating barriers to accessing healthcare. To improve the situation, they suggested healthcare professionals need better understanding, and targeted efforts are required to reduce barriers to good healthcare for care leavers.

Barnardo's [Care-experienced Parents Unite for Change](#) 2022 report recommends five key steps to support care leavers who become parents:

1. **Develop Family Hubs:** Establish Family Hubs in every community, providing accessible and comprehensive support for care-experienced parents, aligning with government commitments.
2. **Enhance support networks:** Support care-experienced parents in building informal support networks, utilising mentoring programs and services like Lifelong Links up to the age of 25.
3. **Local Authority policies:** Ensure all Local Authorities adopt a best practice charter for care-experienced parents, addressing practical needs, from housing to baby care, promoting consistency in support.
4. **Extend corporate parenting:** Extend statutory responsibility to more public bodies, including the NHS and police forces, to ensure consistent support for care-experienced individuals across various services.
5. **Mental Health support:** Develop mental health support for care-experienced parents, involving care-experienced young people, and create a role for virtual mental health leads in each Local Authority to coordinate mental health services for children and young people.

[Themes from engagement with a youth panel: Care leavers' experiences of health inequalities](#) (2023) identifies various aspects of intergenerational transmission of disadvantage and trauma within families

where the mother has experience in out-of-home care (OHC). Previous research has shown that mothers with OHC experience report poorer general and mental health. This study reveals increased odds of their teenage children self-reporting behaviour and mental health problems, including self-harm and attempted suicide, along with higher rates of tobacco and cannabis use, and police contact. The findings emphasise the crucial need for ongoing support structures for parents with OHC experience and their children to mitigate the lasting impact of care experience on these vulnerable families.

#### **Summary of Key Findings - Statutory duties, policy background, local priorities and evidence**

- There are legal requirements that the LLCS must adhere to and these provide a clear framework for the minimum service offer. However, there is not a standard delivery model for leaving care services within England and local needs and evidence of how to improve outcomes for care leavers must help shape the future service offer.
- Lincolnshire's local related policies and strategies already align to statutory requirements and national policy. LLCS will need to be able to respond and adapt to any changes in future policy.
- The scope of the CiC and CYP Mental Health local transformation programmes are relevant to LLCS. The programmes are not complete and it is vital that the new LLCS both informs the programmes but also can adapt to meet emerging recommendations.
- Evidence suggests that LLCS should include:
  - Early transition planning from 16+.
  - A focus on improving the stability and wellbeing of care leavers to enable access to EET e.g. mental health, accommodation stability and peer modelling.
  - Consistent, skilled knowledgeable support. Positive relationships Leaving Care Workers can have a lasting positive impact on the mental health and wellbeing of care leavers.
  - Targeted support to address the much greater health inequalities that care leavers experience, including help to access health services in particular mental health support. It should be noted that many care experienced children experience health inequalities on multiple fronts and are at even greater risk e.g. from an ethnic minority background, LGBTQ+, disabled, have a mental health condition, and known to the criminal justice system.
  - Targeted consistent support for care leavers in custody and upon release.
- More broadly, the Council and other statutory services should proactively provide targeted support for care experienced parents to mitigate the impact that historic trauma can have on the children of care leavers.

## **4. Local and national context**

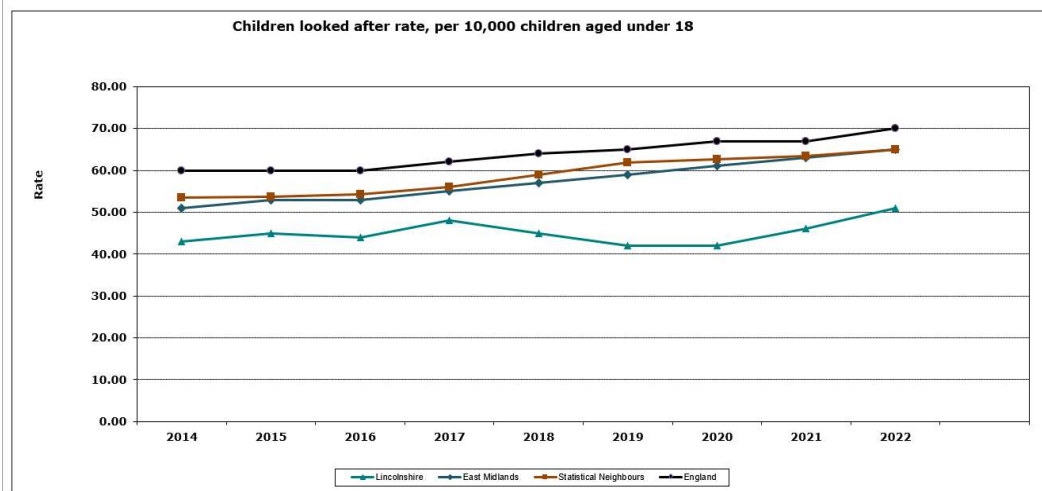
### **4.1. Lincolnshire Data**

- Lincolnshire is the fourth largest county in England; 95% of the county is classified as rural and communities are dispersed across a large and diverse landscape. 48% of residents live in rural areas which is over double the national average. The population is approximately 761,224 residents<sup>13</sup>. Approximately 21.5% of the total population is aged 0-19 years (163,550).
- c. 1/3 of children in the UK live in poverty and are at risk of poorer outcomes. Based on the [Indices of Multiple Deprivation \(IMD\) 2019](#), 6.7% of Lincolnshire's population (approximately 50,000 people) live within the 10% most deprived areas of England. This is highest within Lincoln and East Lindsey. 6 out of 7 Districts in Lincolnshire have 20+% children living in poverty. c.14%-17.8% of children live in households with below average income. 11.6% CYP aged under 16 (15,335) live in

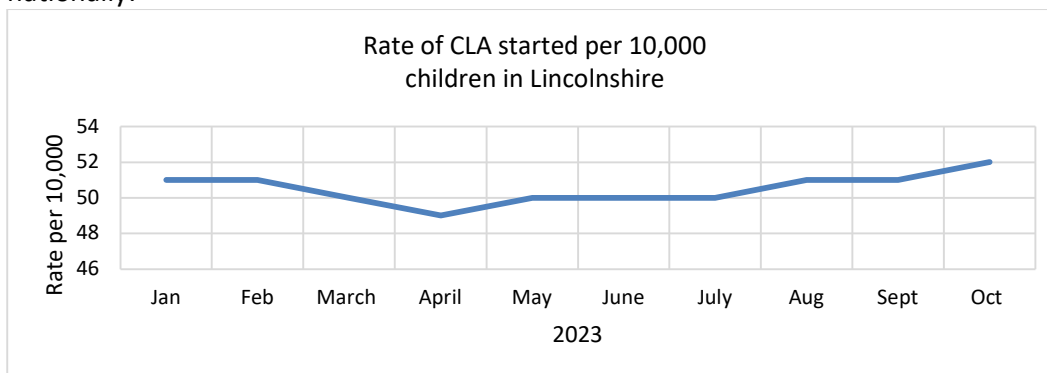
<sup>13</sup> [Office of National Statistics \(ONS\) mid-2020 population estimates](#)

absolute low-income families. 25.1% of children aged under 11 and 19.2% age 11-18 entitled to free school meals.

- In October 2023<sup>14</sup>, Lincolnshire had 3,260 Children in Need (CiN), 403 children with a Child Protection (CP) plan, and 765 CiC; Lincolnshire has lower rates of CIN, CP and CiC than statistical neighbours and England



- Lincolnshire CiC numbers have increased by 10.5% since 2018<sup>15</sup> compared to c.16% increase nationally:



- 82% of CiC were white and 18% from all other ethnic backgrounds.
- 8% of CiC had a disability.
- 24% of all children that entered care in the 6 months prior to October 2023 were UASC. Overall UASC made up 11.6% of all CiC. 98% of UASC in care (87/89) were male.
- In October 2023 there were 936 young people eligible for LLCS:
  - 20% (183) were 16-17 years.
  - 30% (286) were 18-21 years.
  - 42% (394) were 21+
  - 8% (73) were recorded as 'Other' – these care leavers are age 25.
- 173 care leavers were Eligible, 10 Relevant and 753 Former Relevant (including 145 Qualifying<sup>16</sup> young people).

<sup>14</sup> LCC Children's Services Analysis Tool (ChAT) October 2023

<sup>15</sup> 659 Lincolnshire CiC on 31<sup>st</sup> March 2018 (Source: LCC Children's Services Analysis Tool (ChAT) March 2018)

<sup>16</sup> Qualifying care leavers are not currently separated out from Former Relevant numbers; this has been identified as a reporting issue and is being addressed)

- 58% of care leavers live in Lincolnshire and 41% live out of county, with 1% whose whereabouts are unknown<sup>17</sup>.
- 2021-22 data (most recent) indicated Lincolnshire care leavers continuing to live with foster carers which is in line with Statistical Neighbours and England.
- 66% of care leavers were male.
- 19% of care leavers had a disability.
- 70% of care leavers were white and 30% are from all other ethnic groups combined.
- In December 2023, 5 Lincolnshire care leavers aged over 18 years were in custody, which has remained broadly the same for the past 4 years<sup>18</sup>.
- In 2023, on average 48% of Lincolnshire care leavers were in EET compared with 58.5% in statistical neighbours and 56% in England<sup>42</sup>. Care leavers engaging in EET is significantly worse than non-care experienced peers. Nationally, 12.3% of all 16-25 years olds were Not in Education Employment and Training (NEET).
- Former-UASC care leavers have a higher engagement with education; 72% of 16–17-year-olds are in EET and 67.6% of 18+ year olds.
- The proportion of care leavers that are former-UASC in October 2023 is below:

Age	% of care leavers that are UASC	Average by cohort
16	23.5%	30.25%
17	37%	
18	36%	24.6%
19	22%	
20	16%	
21	20%	20%

Table 5: former-UASC care leavers as percentage of wider cohort

On average, former-UASC care leavers accounted for c.25% of the total care leaver cohort and this is expected to grow; grant funding from the Home Office for all former-UASC care leavers up to the age of 21 (and to 25 in education) should be utilised proportionately to fund any future model of LLCS.

- UASC numbers have increased since the mandating of the National Transfer Scheme (NTS) in 2021. Between December 2021 and October 2023 there has been a subsequent 40% increase in former-UASC care leavers. UASC numbers will continue to grow as Lincolnshire has not reached the NTS maximum capacity<sup>19</sup> and there are unpredictable future numbers of UASC presenting from asylum hotels, ongoing NTS referrals and the proposed adult asylum centre at RAF Scampton.
- Since the start of the current contract there has been a 21.3% increase in care leavers<sup>20</sup>. Care leaver numbers are predicted to increase further, partly due to higher numbers of CiC, more UASC and as more children are entering care at an older age. This mirrors trend data nationally and for our regional and statistical neighbours<sup>21</sup>.
- Growth projections from Corporate Performance suggest numbers of care leavers could increase by c.7% by April 2025<sup>22</sup>, taking into account the rising numbers of late entrants into care and

<sup>17</sup> LLCS Q2 2023-24

<sup>18</sup> Average of 4 care leavers in custody; numbers taken from Mosaic as of 31<sup>st</sup> December in 2020, 2021, 2022 and 2023

<sup>19</sup> 0.1% of the 0-17 child population, which would require Lincolnshire to have min. 144 0–17-year-old UASC in care before we would reach capacity and refuse NTS referrals

<sup>20</sup> LLCS contract report showing Open Allocated Cases i.e. 16-20 year olds – increased from 394 in April 2020 to 478 in December 2023.

Note this excludes Qualifying young people and 21+ year olds

<sup>21</sup> [Local Authority Interactive Tool \(LAIT\)](#)

<sup>22</sup> Increase calculated by forward modelling data taken from the ChAT Oct-23

numbers of former-UASC care leavers. Growth modelling using LAIT data on average cohort increases from 2018 and applying them to forward-looking care leaver projections suggests a possible c.59% increase by the same date:

Care leaver cohort by age	Oct-23 (from ChAT)		Apr-25 (from Corp. Performance)		Apr-25 (from LAIT)	
	CL numbers at Oct 23 <sup>23</sup>	% of whole cohort	Predicted numbers from April 25 <sup>24</sup> (breakdown across cohorts)	% of whole cohort	Predicted numbers from April 25 <sup>25</sup> (breakdown across cohorts based on % in column D) *	% of whole cohort
16–17 year olds	183	19.6%	185	18.4%	286	19.2%
18–20 year olds	286	30.6%	343	34.2%	616	41.3%
21+ year olds	467	49.9%	475	47.4%	589	29.5%
<b>TOTAL</b>	<b>936</b>	<b>100.0%</b>	<b>1003</b>	<b>100.0%</b>	<b>1491</b>	<b>100.0%</b>
<b>Variance to Oct 2023</b>			<b>+7.1%</b>		<b>+59.2%</b>	

Table 6 – care leaver projections to April 2025

However, the LAIT data could be considered somewhat unreliable in terms of future trends, due to the anomaly years during the pandemic, skewing those figures. The varying projections indicates the lack of certainty in forecasting future numbers and highlights how volatile those figures can be. It is felt the Corporate Performance projections are more reliable at this point, in terms of modelling future service requirements, as these figures have been calculated using our own data over previous years and taken our local trends into account.

#### Summary of Key Findings – Lincolnshire data

- The rurality of Lincolnshire is important to consider for staff bases and travel in any LLCS model. A high number of care leavers live outside of Lincolnshire, with a large number of former-UASC care leavers in Peterborough. Any future model should consider a base in or close to Peterborough and ensure LCW caseloads account for travel requirements.
- Although Lincolnshire has not seen increases in CIN, CP or CiC to the same extent as other areas there has been a noted growth locally. It is projected that care leaver numbers will continue to rise. Where this relates to UASC, the Council receives grant funding which must be used to proportionately towards the LLCS. Any future commissioning arrangement should be flexible to allow changes to care leaver volumes and associated funding.
- Former-UASC care leaver numbers are projected to increase due to the National Transfer Scheme’s impact on CiC numbers. National policy changes as well as local programmes such as the asylum hotels and RAF Scampton may further impact numbers of former-UASC care leavers.
- Lower numbers of care leavers in EET are a concern in Lincolnshire and will require an increased focus in any future model; any enhancements to the EET offer need to be considered in the wider context of care leavers readiness to engage and include a wider wellbeing offer such as mental health and substance use support.

<sup>23</sup> LCC Children’s Services Analysis Tool (ChAT) October 2023; data includes 73 care leavers categorised as ‘Other’ – these are 25+ year olds who are in scope of reporting due to eligibility for LLCS within the reporting period

<sup>24</sup> Data from Children’s Performance team using October ChAT data as a starting point, incorporating CiC and UASC projections; data also includes 102 care leavers aged of 25+ using the same calculation as the October ChAT for consistency

<sup>25</sup> Data from the LAIT, based on previous annual growth percentages, calculated forward to April 2025 inc 27% increase of former-UASC care leavers, 21% increase in 16-20 year old care leavers and 2.5% increase in 21+ year olds

- Care leavers in custody frequently refuse to engage with services but require focused support to prepare for their release and life in the community, including timely applications for benefits and accommodation. Post-release engagement with EET is also essential if the any potential reoffending cycle is to be broken, as well as support with networks and good mental health. A specialist custody worker may be an option for consideration in any future model.
- Accurate future forecasting of care leaver numbers is difficult given there are a number of unpredictable variables including late entrants into care and UASC arrivals. It is expected though that the cohort will continue to rise over coming years. Care leaver support needs are similarly difficult to predict. Future modelling needs to be sufficiently flexible to be able to properly resource the service to have capacity to meet both demand and support need.

#### 4.2. Stakeholder analysis

A summary of key themes from care leaver feedback conducted as part of the review is below:

Likes	Improvements	Future delivery
Activities	Accommodation matching	Help with emotional support and well-being issues.
Being ourselves and not be made to do things	More supported accommodation options	Monthly mental health drop-ins
Can ask for help if we need it	Most care leavers said they would prefer a named LCW after age 21	1:1 tutor especially to support learning difficulties
UASC in placement at Locate Accommodation felt they understood what the LLCS offer was	Having the choice to stay open or be stepped forward after age 21	Wellbeing / emotional support worker
Supported Lodgings providers treated me like I was part of the family	More information about what the service offer is after age 21	Someone to help with self-regulation and emotions
Mental Health Worker		

Table 7: care leaver engagement

Further engagement is taking place in March and will inform the specification and service delivery of the LLCS. Existing engagement conducted throughout the contract period is detailed above reiterating much of the engagement feedback in *Table 7*, as well as compliments and feedback from professionals working with the service.

#### Summary of Key Findings – Stakeholder analysis

- Care leavers have said that they like early allocation to their LCW and that this helps them feel independent, and that they value having consistency in their LCW. Providing such consistency of support will require sufficient numbers of LCWs to manage the predicted rise in care leaver numbers as well as appropriate levels of remuneration to improve staff retention.
- Support after 21 years old is highly valued, though some care leavers have said they would have preferred to be given the choice to remain allocated to the service and this has been implemented as part of the improvement work. Development and expansion of the 21+ Service is a further resource consideration and is a key part of post-Ofsted improvement.

- Mental health support, both direct intervention and a broader range of wellbeing activities, is highlighted as a key area for future service delivery. Care leavers benefit from in-service support at present (part of Staying Close) and there is an opportunity to develop the service further through recurrent investment.

#### 4.3. Market engagement

In England, the only two Local Authorities that externally commission their leaving care service are Lincolnshire and Cornwall; the latter is only part-commissioned.

Cornwall County Council, commission [CareFree](#) to deliver approximately a third of their Leaving Care Service. CareFree are a Cornish CYP charity who have delivered part of Cornwall's leaving care service since 2015. CareFree employ about a third of Cornwall's total LCWs and offer specialist support around EET and accommodation, along with support to former-UASC care leavers. They are involved in youth work for 11+ year old CiC and work closely with the voluntary sector to fundraise and deliver small projects. Engagement with CareFree indicated they do not intend to become a national organisation at this point or deliver work with other authorities.

Barnardo's deliver Leaving Care Services in part of Scotland, Northern Ireland, and Wales, namely Glasgow, Edinburgh, Belfast, Clackmannanshire, and Denbighshire where they also deliver a 21+ transition service. Barnardo's deliver a range of other services to care leavers including the Kick-Start program to former-UASC care leavers, participation and engagement support, and supported lodgings.

Previous market engagement in Lincolnshire indicates a limited market of other potential suppliers. In 2015, Barnardo's were the only bidder when the Leaving Care Service was advertised as an open tender, and they were awarded the contract following a full evaluation period. In 2019, further market engagement work was undertaken prior to the publication of the tender opportunity, with similarly low interest from providers in the market. However, there were four applications received to deliver the current contract; two were disqualified at the initial stage due to incomplete documentation of poor quality, and two went on to full evaluation, after which Barnardo's were awarded what is the current contract.

The other bidder that was evaluated continues to offer a range of services outside Lincolnshire to children and young people including care leavers, though not a leaving care service. There are a small handful of voluntary sector organisations that offer support to care leavers including education, criminal justice, and supported accommodation options, as well as mentoring. It is not inconceivable there may be interest from the wider children's services market who have experience of working with care leavers if the service was presented to the market through a competitive tender, subject to appropriate indicative budget.

#### **Summary of Key Findings – Market engagement**

- Most authorities deliver their own Leaving Care Service apart from Lincolnshire and Cornwall in England. Furthermore, many authorities have chosen to insource the service.
- There is not an extensive market of providers that deliver Leaving Care Services – Barnardo's is the main supplier.
- Previous procurement indicates low market response and indications are this would be similar during any new tendering opportunity.



#### 4.4. Local Authority inspections

In January 2023, Ofsted introduced a new category in their framework for Inspecting Local Authority Children's Services (ILACS), which separated out care leavers from the previous category which included care leavers with CiC and focuses on *'The experience and progress of care leavers'*.

Since the new category's introduction, ninety-three Local Authorities have been inspected. Only four authorities received an 'Outstanding' judgment for this specific category; Bexley, North Yorkshire, St Helen's, and Essex.

Cornwall, who are the only other authority in England to externally commission part of their leaving care service, have not been inspected under the new framework category yet. In October 2019, they were graded 'Outstanding' overall and 'Outstanding' for the previous ILACS judgement focusing on *'The experiences and progress of children in care and care leavers'*.<sup>26</sup> The report highlights an exceptional participation offer, strong relationship-based practice, tenacious and skilled LCWs who go above and beyond to support young people, purposeful visits to care leavers, prioritisation of care leavers' mental wellbeing, and strong support around EET. Quality of Pathway Plans was found to be variable but at no significant detriment. Given a more recent inspection hasn't been completed a direct comparison to a commissioned service is not currently possible.

The summary of good practice, acknowledged by Ofsted, seen in other Local Authorities' leaving care services is available on request. This information has been obtained from desktop research, conversations, and published Ofsted inspections.

##### 4.4.1. What does Ofsted 'Outstanding' in *'The experience and progress of care leavers'* judgement look like?

The ILACS framework states that *'The experiences and progress of care leavers' is likely to be judged outstanding if the response to young people is consistently good or better and results in sustained improvement to their lives.'*

The table below illustrates the performance of the four Local Authorities who received Ofsted Outstanding in the category of *'The experience and progress of care leavers'*, compared to LLCS Ofsted performance where area for improvement were identified, and is based on a review of the available reports and areas highlighted as good practice or flagged as areas of weakness (*shown in orange*):

OFSTED priority		Essex <sup>27</sup>	Bexley <sup>28</sup>	N. Yorkshire <sup>29</sup>	St Helens <sup>30</sup>	Lincolnshire <sup>31</sup>
1	Care Leavers know their entitlements. They know how and where to access the local offer, often a well-structured website created with care leavers in mind,	✓	✓	✓	✓	✓

<sup>26</sup> [Ofsted Inspection of Cornwall Children's Services](#)

<sup>27</sup> [Ofsted Inspection of Essex Local Authority Children's Services](#)

<sup>28</sup> [Ofsted Inspection of Bexley Local Authority Children's Services](#)

<sup>29</sup> [Ofsted Inspection of North Yorkshire Children's Services](#)

<sup>30</sup> [Ofsted Inspection of St Helen's Children's Services](#) – note that St Helens were judged 'Good' overall but 'Outstanding' for leaving care

<sup>31</sup> [Lincolnshire's Ofsted Report \(April 2023\)](#)

	signposted by professionals. Care leavers will be part of designing their offer, regularly consulted on the provision, quality, and what they feel is needed to best support them and other care leavers.					
2	Additional funds to support their path to independence, such as council tax exemption, free or subsidised Wi-Fi, free transport, tech, and setting-up grants. Care leavers know about and utilise this support.	✓	✓	✓	✓	✓
3	Pathway Plans are updated within the statutory time frame. Additionally, Pathway Plans are updated more frequently to reflect young people's change of circumstance and need.	✓	✓	✓	✓	
4	Specialist Mental Health / Emotional Support professionals are available for care leavers. Agencies collaborate effectively to deliver services for vulnerable young people. Ensuring equal access to mental health care for all care leavers, regardless of their medical history or previous involvement with CAMHs.	✓	✓	✓	✓	✓
5	Specialist support available for young parents.	✓	✓	✓	✓	Not mentioned
6	Continued engagement and support for 21+ care leavers.	✓	✓	✓	✓	
7	Collaboration with wrap-around agencies to support the young person to thrive, such as The Virtual School for NEET and Probation for care leavers in custody.	✓	✓	✓	✓	✓
8	Comprehensive risk assessments for the most vulnerable young people shared and followed amongst agencies.	✓	✓	✓	✓	✓
9	Care leavers feel part of a community, they know how and where to seek support from their Corporate Parents. They can access clubs, societies and events designed for them.	✓	✓	✓	✓	✓
10	Support and visits for care leavers people in custody.	✓	✓	✓	✓	
11	Signposted access to health history and important documents, such as NI, driving license and passport.	✓		✓	✓	
13	Early allocation of Personal Advisors allows for positive relationship building prior to transition to the leaving care service at 18 years old.	✓		✓	✓	
14	Support for former UASC care leavers recognises their individual needs. They are supported to join EET, their identity, religious and cultural needs are well considered and prioritised. Personal Advisers are knowledgeable of UASC needs. Prioritising diversity and culture when considering appropriate accommodation, links to friends and family, and wider support.	✓	✓	✓	✓	Not mentioned

15	Care leavers live in suitable and safe accommodation that meets their needs. Positive encouragement for care leavers to access 'Stay Put' arrangements where appropriate, such as returning home from university during the holidays.	✓	✓	✓	✓	✓
16	Phased support to support readiness for full independence in adult life. Help with tenancy and life skills.	✓	✓	✓	✓	✓
17	Support for young people who are NEET to encourage them into employment, education, or training. Supported by a specialist professional.	✓	✓	✓	✓	✓

Table 8: comparison of LAs with 'Outstanding' for the care leaver judgement, compared to Lincolnshire

#### 4.5. Caseload numbers comparisons

The table below shows the approximate case load numbers for LCWs in other local authorities that have responded to benchmarking research:

Local Authority	Grading (Year)	Caseload per 1.0 FTE LCW	21+ Service model
Nottinghamshire <i>Stat. neighbour</i>	Good (2019)	22	21+ remain allocated to their LCW for up to 6 months to build on existing relationships and maintain level of service offer and then transfer to separate 21+ Service and new LCW.
NC Trust <i>Stat. neighbour</i>	Requires Improvement (2022)	26 max	Post-21 assessment of need if the YP asks to remain open or has been stepped down and returns for support.
Essex <i>Outstanding LA</i>	Outstanding (2023)	20-22	21+ remain allocated to their LCW to build on existing relationships and maintain level of service offer.
Kent <i>Outstanding LA (old framework)</i>	Outstanding (2022)	14-22 (16-20 year olds)	Separate 21+ Service allocate all care leavers to a new LCW, plus Duty service allows effective keeping in touch and triage of low-level queries.
Calderdale <i>Recently brought in-house</i>	Good (2018)  NB/ Outstanding for 'The experiences and progress of children in care and care leavers'	22-24	Post-21 assessment of need if the YP asks to remain open or has been stepped down and returns for support.

Table 9: caseload numbers in other LAs

The average caseload per LCW across these authorities is 23.2 care leavers although it should be noted all service models are different. Essex were judged as 'Outstanding' for the new Ofsted category of 'The

experience and progress of care leavers' and have a separate 21+ Service with caseloads of c.30 care leavers per LCW. Caseloads of c.20 care leavers is considered best practice.

Lincolnshire's current caseload average for 1.0 FTE LCW is c.20 care leavers:

Care leaver cohort	Average caseload
16-17 year olds	6.45
18-20 year olds	11.95
21+ year olds	1.54

Table 10: LLCS caseload per 1.0 FTE LCW

LLCS caseload numbers do not currently include allocation of all 21+ care leavers which is a focus for improvement post-Ofsted. Based on the average caseload shown in *Table 9*, c.41 21+ year old care leavers are fully allocated to a LCW at present<sup>32</sup>, with the rest assigned to a Team Manager for oversight but can be reallocated if required. If all 21+ year old care leavers were fully allocated to an LCW, and with the current 26.6 FTE LCWS, caseload numbers would increase to 36 care leavers per LCW, which is an 80% increase on the current average caseload.

Local Authorities in the East Midlands have a range of service offers for their 21+ care leavers:

Local Authority	21+ allocation process/offer	Keep in Touch (KIT) model	Funding & staffing FTE
Derby City	Post-21 assessments completed ahead of care leaver turning 21 to establish level of support and whether they remain allocated to their LCW. Post 21+ returners are similarly assessed and allocated to a LCW if required.	Pathway Plans contain a QR code to the Local Offer. Use of telephone, visits, text, social media, and traditional letter. Annual contact for care leavers not allocated an LCW.	Funding not separated for 21+ offer.
Derbyshire	<i>Not provided</i>		
Leicester	Care leaver allocated to LCW if longer-term support is required. Duty service for general support.	No change in support or level of service if remain allocated to an LCW.	New Burdens funding* directly allocated to 21+ service funds 1.5 FTE LCWs
Leicestershire	<i>Not provided</i>		
Northamptonshire	Post-21 assessment of need if the care leaver asks to remain open or has been stepped down and returns for support.	Letters, emails, birthday/celebration event cards.	Funding not separated for 21+ offer.
Nottingham City	Care leavers who wish to remain open to the service remain with their LCW;	Local Offer sets out the Council keep in touch with 21+; minimum annual contact via	Funding not separated for 21+ offer.

<sup>32</sup> Based on 26.6 FTE LCWs i.e.,  $av.1.54 \text{ 21+ year olds} \times 26.6 = 40.96 \text{ 21+ care leavers}$

	visit frequency dictated by care leaver but min every 12 weeks. Stepped down care leavers who wish to return are allocated to a Team Manager and then ideally back to their old LCW.	telephone plus birthday/celebration event cards, quarterly newsletters, and invitation to events.	
Nottinghamshire	Transfer summary completed as approach 21 and will be reallocated to 21+ Service but will remain with old LCW if there are specific support needs for up to 6-months before transfer to a named 21+ LCW.	Proactive KIT model of 8 contacts per annum via newsletter, telephone, email, social media, drop-in sessions around the county. Daily duty system for immediate IAG with onward referral to 21+ Service in case more support needed (including reallocation to LCW). Mailshots for any update to Local Offer.	New Burdens funding directly allocated to 21+ Service funds 1.0 FTE Team Manager, 3.5 FTE LCWs, 0.6 FTE Homelessness Prevention LCW
Rutland	Care leavers allocated to an LCW; unclear about level of 21+ offer.	Local Offer available on LA website. Regular KIT via telephone and text, as well as visits see YP at agreed venues.	Not clarified.

Table 11: East Midlands LAs 21+ Service models

*\*The Council already allocates 21+ New Burdens funding to the core LLCS budget and it is not ring-fenced for 21+ service delivery.*

#### Summary of Key Findings – Ofsted inspections

- There have been low numbers of Local Authorities with ‘Outstanding’ for the category of ‘*The experience and progress of care leavers*’ proportionate to the number of ILACS inspections since the changes to the Ofsted inspection framework in January 2023.
- Like many Local Authorities, Lincolnshire was found to be delivering the statutory requirement for care leavers and received ‘Good’ for the stand alone judgement, and ‘Outstanding’ overall for Children’s Services.
- Analysis of Lincolnshire’s Ofsted report shows areas of good practice that were highlighted by inspectors; the Mental Health Worker role was noted as a particular strength. This post is funded via Staying Close to March 2025 only.
- Assuming LCW numbers will increase to support a predicted rise in care leaver numbers, it is also necessary to consider management capacity to have oversight of Pathway Plan quality, staff supervisions and support to strategic delivery. Confidence in the accuracy of data recording into and reporting out of Mosaic reporting needs to be improved in advance of the next Ofsted inspection.
- For Lincolnshire to achieve ‘Outstanding’ in the category of ‘*The experience and progress of care leavers*’, Lincolnshire should develop the 21+ Service to provide named allocated workers and improve engagement with this cohort, improve support to care leavers in custody, and improve quality oversight of Pathway Plans which should be updated as and when circumstances change along with

clear aspirations and evident care for their wellbeing. Ofsted will want to see LLCS deliver over and above the statutory minimum which will require additional staffing and resource capacity, as well as wider system recording improvements and management oversight to challenge quality

- Full allocation of 21+ year old care leavers to a named LCW will impact on the numbers of LCWs required within any new service model, although most 21+ year olds will not require as intensive support.

#### 4.6. Care leaver and Leaving Care Worker projections

Based on future care leaver projections alone, more LCW capacity will be needed from 1<sup>st</sup> April 2025 onwards. In addition, different service models will have an impact of LCW capacity. For example if a LWC is only allocated those aged 21+, they would have a higher caseload than a LCW allocated with only 18-21 year olds because the support offer is different:

			Oct-23 (from ChAT)			Apr-25 (from Corp. Performance)		
LCW options	Care leaver cohort by age	Indicative max caseload per LCW	CL numbers at Oct 23 <sup>33</sup>	% of whole cohort	Optimum no. of LCWs	Predicted numbers from April 25 <sup>34</sup> (breakdown across cohorts)	% of whole cohort	Optimum no. of LCWs
1	16-20 year olds	20	469	50.1%	23.5	528	52.6%	26.4
	21+ year olds	75	467	49.9%	6.2	475	47.4%	6.3
	TOTAL		936	100.0%	29.7	1003	100.0%	32.7
2	Total 16-24 year old cohort	23.2	936	100.0%	40.3	1003	100.0%	43.2

Table 12: care leaver and LCW projections on 1<sup>st</sup> April 2025

The above table demonstrates scenarios for LCW numbers based on different modelling approaches:

- **Scenario 1** – caseloads are 20 for LCW’s supporting the 16-20 year old cohort. LCW’s supporting 21+ care leavers have a higher allocation rate of 75. This is based on the DfE New Burdens Assessment in 2018 indicating that c.20% of care leavers aged 21+ would require engagement each week. 1 FTE 21+ LCW, with a caseload of 75, could support 15 care leavers (20% of caseload) for 2.4 hours per week. This model should allow for some flexibility for care leavers 21+ to remain allocated to their same LCW based on needs.
- **Scenario 2** – all care leavers aged 16-24 year are allocated based on a caseload of 23.2 care leavers per LCW, which is the average caseload number detailed in *Table 9*; all care leavers including 21+ year olds will receive an equal level, or offer, of support. This model would provide flexibility and capacity to support 21+ care leaver should they require a more in-depth service offer.

Whilst the whole leaving care cohort is projected to increase by April 2025, exact numbers are difficult to predict as a result of variable such as numbers of late entrants into care and former-UASC care leavers. Care leavers’ support needs are equally difficult to predict; as an example it may be that increasing

<sup>33</sup> LCC Children’s Services Analysis Tool (ChAT) October 2023; data includes 73 care leavers categorised as ‘Other’ – these are 25+ year olds who are in scope of reporting due to eligibility for LLCS within the reporting period

<sup>34</sup> Data from Children’s Performance team using October ChAT data as a starting point, incorporating CiC and UASC projections; for consistency, data also includes 102 care leavers aged of 25+ using the same calculation as the October ChAT

numbers of 21+ year olds require in-depth support from their LCW for a sustained period or that more care leavers would benefit from targeted and specialist mental health support.

Numbers of former-UASC care leavers are expected to continue due to National Transfer Scheme and the possibility of adult asylum accommodation in the county resulting in age assessment claims. The growth in former UASC care leavers is supported by LLCS and funded through a specific budget from the Home Office. The former UASC cohort have specific needs and challenges that requires specialist workers, accommodation and a LCW team. Any further growth in this cohort can be funded through the UASC budget.

#### 4.7. Implications for future LLCS delivery

##### Summary of Key Findings

- Research into other Local Authority offers, recent Ofsted judgements, and national/local trends indicate that LLCS can expect to experience increasing service demand in the coming years due to more care leavers, particularly former-UASC care leavers, more complexity of need and rising delivery costs exacerbated by inflation, cost of living and the recruitment and retention of high quality staff.
- The LLCS model needs to include practice development to move the service towards a future Ofsted 'Outstanding' judgement in *'The experience and progress of care leavers'* and therefore 'Outstanding' for Children's Services overall.
- The cost of delivering the LLCS will be higher than the current contract and a budget increase will be required, irrespective of the delivery model, using relevant funding streams, including the Home Office UASC Grant, to increase the service budget envelope.
- Research detailed in this Commissioning Plan indicate that a revised and improved LLCS will require:
  - Increased management capacity with stronger strategic and operational leadership, including service quality, data recording and reporting.
  - Increased LCW's to meet the growing number of care leavers and those with more complex needs and to ensure caseload numbers are sufficient to provide high quality support.
  - Improved and consistent transition support for 16–18–year-olds to LLCS.
  - Improved Pathway Plans that reflect changing circumstances and are clear regarding aspirations for care leavers.
  - An improved 21+ Service offer allowing more capacity for keeping in touch and allocating those that need continuity of support.
  - A robust strategy focused on improving care leavers engagement with EET.
  - Bespoke support for young people who have specialist needs, such as young parents and care leavers in custody, to meet their individual needs and overcome their barriers.
  - Embedded mental health support available for all care leavers.
  - Improved information for all care leavers, to ensure they understand their entitlements, wider corporate parenting offer and are encouraged to keep in touch with the service.

## 5. Options analysis

### 5.1. Service model options

There are 3 service model options to be considered:

#### 5.1.1. Option 1 - Do nothing i.e. decommission LLCS

It is a statutory requirement for the Council to deliver a Leaving Care Service. This option is not feasible.

**This option is not recommended**

#### 5.1.2. Option 2 - Continue to deliver the model of service that is currently being provided

The Council could choose to deliver the service with the same model moving forward. The service review has shown that this model would not be sufficient to deliver the expected volume and standard required in a Leaving Care Service.

It is also noted that it would still cost more to deliver the current LLCS model of service, given the variations and enhancements to delivery agreed within the current contract period and rising costs for staffing and other service-related expenditure. As a minimum, an 'as currently provided' model and structure would cost an indicative £2,360,527 per annum as an insourced service.

**This option is not recommended**

#### 5.1.3. Option 3 - Deliver the preferred model

This option would allow the Council to deliver a high quality, robust service for Lincolnshire Care Leavers. It includes capacity to deliver the transformation work following the recent Ofsted inspection, develop the 21+ offer in line with Ofsted good practice and respond to Corporate Performance's projections regarding future care leaver numbers.

**This option is recommended**

The table below details the service elements to be included in the preferred model moving forward:

Service element	Preferred model	Difference to current service	Future considerations
<b>Leaving Care Worker (LCW) numbers</b>	The number of LCWs will increase due to the rising numbers of care leavers and to respond to the new requirements of the service moving forward.  From April 2025, based on care leaver projection numbers in <i>section 4.6</i> , the new service would need to have c.33 LCWs in	Increased capacity in the Leaving Care workforce and better pay will lead to higher quality service provision for care leavers, as well as the capacity to respond to any emerging needs of the cohort.	LCWs capacity will need regular review as capacity fluctuates.



	<p>place to deliver the service effectively and generate the additional capacity to deliver a quality service to care leavers.</p> <p>The pay grade of LCWs should be increased to help attract and retain high quality staff.</p>		
<b>Transition</b>	<p>Care leavers will continue to be allocated to LLCS shortly after their 16<sup>th</sup> birthday; complex young people may be ‘twin tracked’ by both a Social Worker and LCW in preparation for full transition to LLCS at 18 years old.</p>	<p>Increase in LCW capacity will ensure care leavers are consistently allocated early as this is considered best practice to facilitate effective relationships and trust to develop prior to turning 18. LCW’s will have more time to build effective relationships and enable a successful transition.</p>	
<b>Pathway Plans</b>	<p>Increased focus on high quality Pathway Planning. The recommended increase in LCWs will ensure that statutory timescales for completion are met, as well as provide greater capacity to enable workers to update Pathway Plans more frequently as and when circumstances change and will also drive up the quality of those plans and ensure they are meaningful to care leavers.</p>	<p>Statutory timescales on Pathway Plans are currently being met but increased LCW capacity will further improve and enhance both frequency and quality.</p>	
<b>Specialist user groups</b>	<p>Lower caseloads for LCWs will facilitate greater capacity for bespoke support for any care leavers that may require more intensive support for a period of time e.g. care leavers in custody,</p>	<p>Increased capacity in the Leaving Care workforce will allow more intensive support to be delivered in response to changing needs.</p>	

	young parents, and disabled care leavers.		
<b>EET</b>	Specialist EET Officers will provide focused support for care leavers to access suitable pre-employment training, qualifications and employment opportunities. Delivery of the Care Leaver Apprenticeship Service (CLAS).	No change recommended to preferred model from April 2025.  However these specialist roles would be further developed to ensure that the right support is provided to care leavers to engage and sustain in EET, working alongside other specialist workers, such as the Mental Health and Accommodation Officers. Officers would be upskilled to ensure that the performance in this area is improved, in line with national targets and comparable with statistical neighbours.  No change as CLAS would continue.	Consider sustainable funding of further EET post that is currently funded through the Staying Close grant to March 2025, subject to DfE decision on continuity of funding.
<b>Information on LLCS Offer</b>	Improved information via updated Local Offer, use of newsletters and other targeted communications; care leavers will have better understanding of their entitlements and where to seek support.	21+ care leavers will be contacted more than the statutory minimum; this will also be informed by the ongoing Transformation/Improvement programme	
<b>Mental health &amp; emotional wellbeing support</b>	Increased Mental Health Worker capacity to be permanently funded to up-skill LCWs around mental health and provide some direct intervention and support to access adult mental health services.	Permanently fund mental health support and increase capacity.	Consider sustainable funding of Wellbeing Worker post that is currently funded through the Staying Close grant to March 2025, subject to DfE decision on continuity of funding.
<b>Additional specialist workers</b>	Specialist workers will provide targeted expertise on accommodation, participation and UASC.	No change.	DLT may also want to explore other additional posts that other excellent LAs have invested in:

	<p>These roles are valuable in offering targeted support to specific cohorts of young people with the wider care leaver cohort and it is recommended that they are included in the future service model.</p>		<ul style="list-style-type: none"> <li>• dedicated Benefits Officer</li> <li>• dedicated Social Worker</li> <li>• Occupational Therapist</li> </ul> <p>Consider sustainable funding of Connective Workers, Substance Misuse Worker<sup>35</sup> post that is currently funded through the Staying Close grant to March 2025, subject to DfE decision on continuity of funding.</p>
<b>21+ Service</b>	<p>When care leavers reach age 20 their allocated LCW will commence an assessment to understand and plan support to meet their needs 21+.</p> <p>Where needed, care leavers that require consistency of LCW will remain allocated to their existing LCW. Their LCW will continue to visit and support them as needed until they are ready to transition to an allocated 21+ LCW.</p> <p>For care leavers that have been assessed as able to transition to a stepped down offer, transition planning will commence at age 20 with a new allocated 21+ LCW.</p> <p>21+ LCW's will keep in touch with 21+ care leavers based on their</p>	<p>In the current service model, the majority of 21+ care leavers are allocated to Team Managers, with a relatively small number allocated to an LCW.</p> <p>Developing the service model so that all 21+ care leavers have an allocated worker would provide care leavers with a quality service and is in line with Ofsted feedback.</p> <p>More regular contact would ensure care leavers always had a route back into service and would encourage them to access low level support instead of waiting until crisis point.</p>	

<sup>35</sup> The Substance Misuse Worker is embedded into LLCS via Public Health's substance misuse support contract; there is flexibility in the new substance misuse contract with Turning Point to continue embedding this post within LLCS from 1<sup>st</sup> April 2025, subject to funding.

	<p>needs this may involve weekly contact for some, visiting care leavers possibly c.3 monthly but as a minimum being in active contact every 6 months and at key times of year e.g. birthdays, Christmas.</p> <p>There will continue to be a Duty service for care leavers to contact in case of emergency.</p> <p>The 21+ offer is the same for Qualifying young people aged 16+ i.e. there is no statutory visit or Pathway Plan requirement. Qualifying care leavers aged 16-20 are allocated an LCW</p>		
<b>Supported Lodgings</b>	<p>Lincolnshire Supported Lodgings is Ofsted registered as a supported accommodation provider, offering more vulnerable care leavers the opportunity to live in a family setting. Whilst the majority of placements are for 18-21 year olds, there is the option of 16-17-year-olds being placed in an 'assessment beds' as a precursor to an ongoing placement.</p> <p>Supported Lodgings providers are self-employed and are supported by trained staff, along the same principles as Supervising Social Workers.</p>	No change recommended to preferred model from April 2025; this would remain part of the future service model.	

Table 13 – service model

## 5.2. Commissioning of the preferred service model

To deliver the preferred service model from 1<sup>st</sup> April 2025 as detailed above, the Council have 2 options to consider:

- **Option 1** - continue to externally commission the service and undertake an open competitive tender process.
- **Option 2** - insource the service and Children's Services will provide it directly.

Prior to looking at those options in more detail, the indicative costings for each delivery option is set out in the section below:

### 5.2.1. Option 1 - externally commissioned LLCS

#### Staffing costs

This delivery option has been costed based on information supplied by the incumbent provider mapped onto the County Council's salary grades. It is assumed that staff are funded at the top of their salary grades. This also assumes LCWs are paid a LCC Grade 7 equivalent. However, it is important to note that a different supplier would have different posts and salary structures.

The delivery option has been costed using the staffing structure detailed in *Table 1*, with an additional 6.4 LCWs taking this to 33.0 FTE and 2.0 FTE new Mental Health Worker posts, totalling **£2,322,637**.

Note that the indicative staffing cost does not include additional posts funded via the Staying Close grant highlighted in *Table 13* i.e. Wellbeing Worker, Substance Misuse Support or Connective Workers.

#### Additional/Corporate Costs:

Indicative additional costs have been costed based on the incumbent provider. A different provider may have different costs which could be lower or higher.

Budget breakdown	Total
<ul style="list-style-type: none"><li>• Recruitment</li><li>• Insurance</li><li>• Apprenticeship Levy</li><li>• Transport, travel, IT equipment and related staffing sundries</li><li>• Accommodation, utilities, stationary and associated costs</li><li>• Management and Corporate Overheads</li></ul>	<b>£356,293.50</b>

Table 14 – indicative additional costs for commissioned service

#### Total cost:

Total indicative cost for externally commissioned LLCS is **£2,678,930 per annum**. The contract value over 5 years (1<sup>st</sup> April 2025 to 31<sup>st</sup> March 2030) would be c.£13.39m. Note that included in the contract would be a clause allowing an inflationary increase to the contract annually, based on relevant indices and where there is evidence of increasing costs that are greater than the current budget. For every 1% increase this would equate to £26,789. This would be built into the Council's financial planning.

Providers may tender costs under the indicative amount, offering additional savings on the potential contract value. Any providers unable to submit a contract cost under the indicative amount to the market would score low for price within the evaluation; there is a risk that providers may consider the indicative budget insufficient.

### 5.2.2. Option 2 – insourced LLCS

If the service were to be insourced, LLCS would sit in Children’s Services directorate under the Head of Leaving and Supported Living, supported by the Corporate Parenting Manager. The Council would look to transfer the service as is within the Children’s Services structure, using the Children in Care teams as a basis to realign an indicative service staffing structure.

#### Staffing costs:

Staffing costs have been calculated by mapping the salaries for existing staff members in the current commissioned service to the corresponding Council grade and spinal column point, with an additional 6.4 LCWs taking this to 33.0 FTE and 2.0 FTE new Mental Health Worker posts; this does not include pay increments beyond year 1. Indicative staffing costs for the insourced LLCS are **£2,437,103**.

Whilst is expected nearly all staff will be eligible to TUPE to the Council, a small number of posts may be then redeployed to other areas of the Council or assimilated within the proposed structure in a comparable role. The final management structure will be subject to further refinement and will be agreed by the Executive Director for Children’s Services in consultation with the Head of Paid Service.

Note that the indicative contract cost does not include additional posts funded via the Staying Close grant highlighted in *Table 13* i.e. Wellbeing Worker, Substance Misuse Support or Connective Workers.

#### Additional/Corporate Costs:

Indicative additional costs are in line with current LCC corporate costs:

Budget breakdown	Per annum	Notes
<ul style="list-style-type: none"> <li>• Recruitment</li> <li>• Insurance</li> <li>• Apprenticeship Levy</li> <li>• Transport, travel, IT equipment and related staffing sundries</li> <li>• Accommodation, utilities, stationary and associated costs</li> <li>• Management and Corporate Overheads</li> </ul>	<b>£101,572.00</b>	<ul style="list-style-type: none"> <li>• Majority of costs would be picked up corporately</li> <li>• £1500 per FTE for transport/travel/IT etc</li> <li>• Additional accommodation budget identified to resource Peterborough office space</li> </ul>

Table 15 – indicative additional costs for insourced service

Total indicative cost for insourced LLCS is **£2,538,675 per annum**.

Note that salary uplifts have not been calculated (future pay award or increased spinal column point) and would depend on increases for Green Book employees negotiated via National Employers and the relevant employment Unions. A movement of one spinal column point would equate to c.£66,000 additional cost. Normally budget managers should seek to manage this within existing staffing budgets.

## 6. Funding

Based on the cost modelling in *sections 5.2.1. and 5.2.2.* it would be c.£140,255 cheaper per annum from 1<sup>st</sup> April 2025 to insource the service.

An overview of finances is set out below:

Item	Cost
Base Budget	£ 1,218,932.00
S31 PA Contribution	£ 117,811.00
Budget Increase (Contract Pressures Funding)	£ 105,000.00
<b>Total Budget</b>	<b>£ 1, 441,743.00</b>
<b>New Model Cost</b>	
Option 1 Outsourced	£ 2, 678,930.00
Option 2 In-sourced	£ 2, 538,675.00
<i>Variance to cost option 1 compared to 2</i>	<i>-£ 140,255.00</i>
<b>Extra UASC Contribution to Budget*</b>	
Option 1 UASC Contribution @30% + specific costs	£ 866,921.00
Option 2 UASC Contribution @30% + specific costs	£ 860,455.00
<b>Variance to Budget once UASC Contribution Added</b>	
Option 1 Outsourced	<b>-£ 370,266.00</b>
Option 2 Insourced	<b>-£ 236,477.00</b>
<i>Variance to budget option 1 compared to 2</i>	<i>-£ 133,789.00</i>

Table 16 – budget overview

\*Currently 25% of the Care Leaver cohort is former-UASC care leavers and by 2025 this is expected to be 30%+ and therefore, 30% of the contract cost could be met by the UASC budget (this percentage would be flexible and in line with the changing proportion of UASC Care Leavers). Any specific costs, attributed solely to UASC care leavers, such as a premises in Peterborough, would also be met by the UASC budget i.e. funding for an office space in Peterborough. The UASC budget would also be attributed towards the salary for the Head of Service for Leaving Care and Supported Living<sup>36</sup> under the insourced option; savings on the existing staffing budget of £32,593 could be reinvested into LLCS to reduce the cost pressure further. UASC contribution to the LLCS budget would be regularly re-based in line with cohort share.

Regardless of whether the service is externally commissioned or insourced, there will be a cost pressure for the Council of at least **£236,477.00** per annum.

Children's Finance have confirmed that there is £151,219 in the 'Young People of Lincolnshire' non-recurrent reserves (former-Connexions budget) which could be used to wholly or proportionately off-set the cost related to EET posts for at least the first year of any new service.

If LLCS is insourced, further recurrent savings of c.£99,000 per annum may be possible if existing LCC office space can be utilised to accommodate LLCS staff, with the exception of a Peterborough base.

<sup>36</sup> Assuming Head of Service would be on SLC2 by 1<sup>st</sup> April 2025

Both elements would reduce the cost pressure for an insourced service in year one (2025/26) by up to £250,000, and recurrent cost pressure would be built into medium-term financial planning.

## 7. Benefits and risks

### 7.1. Option 1 - Commission LLCS with an external provider

#### BENEFITS

- **Independent budget control and contract terms can protect against overspend:** spend would be within the agreed contract sum, and any increases would be limited by the Terms and Conditions, with any additionality agreed through the Council's financial and commissioning approval processes.
- **Strengthening the local market:** the value of this large contract may attract new entrants or assure the presence of the incumbent supplier in Lincolnshire which has benefits on other services.
- **Added Value:** an external provider may be able to apply for additional funding that cannot be accessed by the Council, adding value to commissioned services. Large charities can also bring added value to the service in the form of donations and investments.
- **Lower staffing costs:** independent providers will often have lower staffing costs than the Council, largely due to lower pension contributions.
- **Independence from the Council:** care leavers are used to the service being delivered outside of the Council and may feel this has benefits with the support feeling separate from their Social Worker interactions and a step towards independence. This has not been noted as a specific request from care leavers in engagement but has been a consideration previously.

#### RISKS

- **Disruption of service if supplier changes:** unless the incumbent provider is awarded the contract, there is likely to be a 12-18 month period of disruption with a new provider as services and staff transfer across or whilst new staff are recruited. Any new supplier would also require additional support to integrate with Council systems including Mosaic, all of which could have a negative impact on care leavers.
- **Impact on Children's Services' Ofsted outcome:** Ofsted are likely to undertake another full inspection in 2027 (previous inspections in 2019 and 2023) and there is the risk with an externally commissioned provider that the service may not be fully aligned with the Council in terms of reporting, quality, management consistency and service level expectations and so adversely impact on Lincolnshire's 'Outstanding' grade. The recent 2023 inspection highlighted weaknesses in '*The experiences and progress of care leavers*' which was found to be 'Good' (see 2.7. and 2.8.), resulting in improvement work within the current service, and there would be the risk that necessary improvements or further service developments are partially outside of Council oversight and control.
- **Less flexibility to evolve service:** an externally commissioned service would not be able to provide a flexible response to changes in service and would require contract variations to change their offer. Those variations can be limiting as we have seen throughout the service review, care leaver numbers are volatile and there is unpredictability in terms of what the LLCS will need to look like over time. More flexible Terms and Conditions can be developed to mitigate this but there will always be issues around changing the service quickly in response to care leaver numbers and demands, support needs, rises in UASC and any other external factors that may arise throughout the life of the contract.



- **Financial uncertainty:** related to the last point, the unpredictability of service needs will make it difficult for providers to submit a bid that would sustain the life of the contract. This may then result in budget negotiations, uplift requests and variations and potentially lengthy and resource-intensive processes. It also weakens any benefit around budget control and lower initial costs as financial pressures may only become apparent at a later date, as seen with the current contract.
- **Benchmarking:** if the Council decides to commission the service from the external market from 2025, Lincolnshire will be the only LA in England to commission out the whole of the service. Whilst this is no different to the current position, it is worth noting that since the last re-procurement a number of LAs have insourced the service to allow them greater control and flexibility to manage the service, aligning it to other related services within their LA.
- **Limited marketplace:** there is a limited marketplace for providers that deliver leaving care services (see 4.3.) The past two open tenders in 2014 and 2019 yielded little interest from the marketplace with only two viable bids in 2019. This could be due to the declining numbers of LAs that now commission this service externally in England. There is a significant risk that very few responses will be received.
- **Higher corporate costs:** non-staffing costs and central costs included in a provider's budget will likely be higher than insourcing due to the benefit of the Council being able to achieve economies of scale.
- **Ongoing Council oversight and support to service quality:** the Council will need to continue allocating resources to a commissioned service i.e. contract implementation and ongoing contract management via Commissioning, strategic oversight via Head of Service for Leaving Care and Supported Living and the CPM, data systems and reporting, staff training and quality improvements etc.

### This option is not recommended

## 7.2. Option 2 - Insource LLCS and deliver within Council Children's Services

### BENEFITS

- **Greater flexibility to evolve service to meet need:** one major benefit of bringing the service in house would be the flexibility it would give the Council to be able to deliver, evolve and quality assure the service. The service could be much more easily developed according to the changing needs and demands of the service; both in terms of changing numbers of care leavers and emerging priorities. In recent years, LLCS has needed to be more dynamic and reflective of both local and national priorities as they emerge and a commissioned service has made this difficult to achieve in a timely manner due to contractual restrictions.
- **Synergies with LCC services:** by bringing LLCS in-house, greater integration with other Council services can be developed. The service would be led by the current Head of Service for Leaving Care and Supported Living and the Corporate Parenting Manager, and would be integrated into the wider service, developing much closer working relationships with colleagues in the Social Care, FAST and Future4Me teams, creating a more seamless transition and service offer for care leavers who may be involved with a number of these professionals. It would also improve the working relationship with other commissioned services such as Youth Housing, as there would no longer be commercial sensitivity. Links to Virtual School, Participation, SEND, and Adult Social Care would be strengthened, with additional oversight of service KPIs and quality through Children's Performance and Quality Standards team
- **Efficient use of resources:** section 6. indicates a lower cost when insourcing the service, largely due to the benefit of the Council's infrastructure resulting in less non-staffing costs.

- **Staff recruitment and retention:** it is anticipated that if the service were to be brought in-house that staff recruitment and retention may be more successful due to the attractiveness of the Council's Terms and Conditions for employees. This would likely result in a higher calibre of candidates, which would drive up the quality and effectiveness of the workforce for the service.
- **Strategic management oversight:** bringing the service in-house would allow it to be managed more closely and strategically by the Head of Service for Leaving Care and Supported Living and would ensure that the service was fully integrated into the wider Children's Services. Insourcing would ensure alignment to our framework and practice models, improving service quality within the ILACS requirements.
- **Corporate overheads lower:** potential savings on overheads through insourced delivery through efficiencies and use of existing corporate resource including HR, accommodation and administrative support.
- **More seamless transition to LLCS and adult care:** LCWs would be linked to CiC and FAST social care teams which would better facilitate transition to LLCS and improve understanding of care leaver needs, with improved allocations and twin tracking. Care leavers moving to adult social care would be similarly supported within LCC processes.
- **Greater understanding of performance reporting:** continued use of Mosaic for recording and improved integration of reporting and data quality.

## RISKS

- **Disruption of service:** there is likely to be a period of 12-18 months where the service could be disrupted as it transfers to the Council, which could have a negative impact on care leavers. Barnardo's already upload performance information onto the Council's Mosaic system which would ease data transfer.
- **Initial staff turnover:** there is a risk that current staff may choose not to transfer to the Council, which could have a negative, short-term impact on service delivery. The Council's terms and conditions of employment are likely to be more favourable and so it is expected most staff would want to transfer. The Council could also commence recruitment to additional posts before 1<sup>st</sup> April 2025.
- **Barnardo's presence in Lincolnshire could be compromised:** by insourcing the service, this could have an impact on Barnardo's presence in Lincolnshire's marketplace. Without a substantial contract of this nature, they could potentially choose not to remain active in Lincolnshire. This may also be an implication if the service was tendered and they were not successful. It may also be a risk regarding the delivery of Supported Lodgings if current providers do not wish to be managed by the Council or the Supported Lodgings Workers do not transfer. This could be commissioned separately but may not be a cost effective proposition to Barnardo's due to associated management and resource overheads.
- **Current strategic capacity to manage the transfer:** Children's Services is currently delivering a number of internal transformation programmes as well as nationally important programmes such as Family Hubs and the Families First for Children Pathfinder. The timing of insourcing may not be ideal, and consideration should be given to whether there is sufficient strategic capacity to deliver the programme of work at this time.
- **Corporate capacity to project manage the transfer:** the Council will need to identify project capacity to support the transfer i.e. admin (HR including TUPE, payroll and pension, BWON), accommodation, asset transfer etc. Support from Children's Commissioning will be required during the exit period to maintain oversight of contract KPIs and delivery quality and may be beneficial to provide post-transfer support to the service area until identified elements are operational.

- **Negative association with the Council:** some care leavers may have a negative association with the Council and Social Care and they may choose to disengage with support, however, there should be continuity of LCW and this has not impacted other LAs in their decision to insource the service.
- **Service growth could be more costly:** as the staffing costs for Council staff are likely to be higher, if future service development or expansion is required, it will cost more in staffing than it would if commissioned externally. Furthermore, the service could increase exponentially if not monitored with the same vigour as a commissioned service, which could have a negative impact on the wider Children's Services budget.

**This option is recommended**

## **8. Summary and recommendations**

The review has found that LLCS requires further development to ensure it meets the changing needs and demands of the cohort. The service must continue to build on service improvements that are in progress, to ensure that Lincolnshire care leavers receive an excellent service that supports them to transition into the next phase of their lives, with the skills and confidence they need to thrive as adults.

The new service must ensure that there is the appropriate level of leadership and management oversight and an increased staffing capacity to ensure caseload numbers are kept low and to enable LCWs to respond to that growing numbers of care leavers; trained and supported to deliver quality services to all care leavers, including former UASC care leavers, those from minority groups and those with more complex needs. Specifically, there must be the capacity within the new service to develop a strategy focused on improving care leavers engagement with EET and capacity to deliver bespoke support for young people who have specialist needs, such as young parents and care leavers in custody, to meet their individual needs and overcome their barriers.

Transitions will be a key element of the new service. It must look to strengthen and develop a responsive and high quality 21+ service, providing that older cohort of care leavers with practical and emotional support to ensure that they are able to transition into adulthood, as well as adopting an improved and consistent approach to allocating more 16-18 year olds, earlier to allow that smooth transition from a CiC to a care leaver. Care Leavers have told us that keeping the same LCW wherever possible is a priority for them and so this will be a key feature in developing this area of work.

Young people have also fed back that they greatly value the mental health and emotional support they receive through the current service and this must also be embedded in the new service.

From a quality perspective, the new service must ensure that service quality, data recording and reporting are of an excellent standard and that Pathway Plans reflect changing circumstances and are clear regarding aspirations for care leavers.

These key elements are built into the preferred model.

In terms of how the new service might be delivered, the review has found that there are risks and benefits associated with each option. Whilst bringing the service in-house allows the most flexibility to be able to evolve the service over time it will require resource from across the Council to successfully deliver the implementation.

Nevertheless, there are significant benefits to bringing a statutory service of this nature in-house as it would allow us to integrate the service with Social Care teams, as well as removing the commercial constraints that are in currently place for LLCS, when working with other commissioned services.


There would also be the opportunity to exercise a greater strategic influence across the service, including with the Integrated Care Board and health providers as it would sit directly under the responsible Head of Service for Leaving Care and Supported Living and the Corporate Parenting Manager, and this flexibility would allow us to be responsive and re-design the service as needed, according to demand and our strategic priorities.

However, if externally commissioned, there would still need to be the ability for the Council to exercise tighter, strategic control over the service, developing more of a strategic partnership arrangement, which may be off-putting to providers, but necessary to develop and improve the service. This element of strategic oversight would be a key consideration in terms of how it would need to be commissioned; there would need to be far greater flexibility within the terms and conditions of the contract to vary the number of LCW required in accordance with demand, manage index-related cost increases, all of which would impact of any available budget and potential service variations. Benchmarking of an externally commissioned service is also difficult as there are no fully-commissioned Leaving Care Services in England.

**Recommendations:**

1. **Service delivery model Option 3**, to deliver the preferred model, as this will provide a high quality Leaving Care Service to Lincolnshire care leavers, as set out in the review.
2. **Commissioning Option 2**, to insource the service, is selected as the delivery model. This option affords the Council the best opportunity to develop, embed and strategically manage this key, statutory service. In the long-term, the service would be integrated into the wider Children's Services and would deliver a highest quality service for our care leavers.
3. To delegate to the Executive Director of Children's Services , in consultation with the Executive Councillor for Children's Services, Community Safety, Procurement and Migration the authority to take all decisions necessary to deliver the recommendations above.

**9. Appendices**

<b>Appendix</b>	<b>Title</b>	<b>Attachment</b>
Appendix A	Equality Impact Analysis	 LLCS Equality Impact Analysis v.2.docx





**Open Report on behalf of Heather Sandy, Executive Director - Children's Services**

Report to:	<b>Children and Young People Scrutiny Committee</b>
Date:	<b>19 April 2024</b>
Subject:	<b>Children and Young People's Mental Health Transformation Programme</b>

**Summary:**

Lincolnshire County Council Children's Services is the delegated lead commissioner for Children and Young People's (CYP) mental health services in Lincolnshire, on behalf of NHS Lincolnshire Integrated Care Board (ICB), and currently commissions the following services, which are jointly funded by the Council and the ICB:

- Online Mental Health Support Service (Kooth) – provided by Kooth Digital Health Ltd. (£295,000 p/a in 2023/24)
- CYP Mental Health Services – provided by Lincolnshire Partnership NHS Foundation Trust (LPFT) (£18,890,000 p/a in 2023/24), which include:
  - Healthy Minds Lincolnshire (HML)
  - Mental Health Support Teams (MHSTs)
  - Child and Adolescent Mental Health Service (CAMHS) – including the CYP Complex Needs Service, CYP Eating Disorder Service, Learning Disability (LD) Team, Crisis and Enhanced Treatment Team (CEETT) and CYP Keyworking Team.

In recognition of the increasing pressures on CYP mental health services and national developments, it was agreed in 2022 that a large scale CYP Mental Health Transformation Programme would commence that will ultimately re-shape local services based on the needs of Lincolnshire CYP.

During Phases 1 and 2 of the Programme, a wide range of insight was gathered in relation to stakeholders views and feelings about CYP mental health support. This included face-to-face and virtual events/meetings with professionals, young people and parent/carers, LPFT CYP mental health staff engagement events, and online stakeholder surveys. A number of key themes were evident throughout the engagement and across a number of different stakeholders, which are outlined in detail in this report, but the key themes included:

- Waiting times to receive support are too long and need to be reduced.
- There needs to be more and easier access to support for CYP and families.
- More effective and regular communication is needed.
- Parents/carers and professionals would like more training and education.
- We need to improve transitions, particularly gradual transition to adult services.

- There needs to be broader and more flexible support.

Also during Phase 2 of the Programme, a significant exercise was undertaken to gather and collate a wide range of data in relation to CYP mental health needs nationally and locally, including demographic and population needs data, health inequalities information, local trends and performance data. Insights from the analysis of this data are detailed in this report.

During the most recent phase of the Programme (Phase 3), all of the information gathered during Phases 1 and 2 have been collated, analysed and summarised. Each of the Programme workstreams have used this intelligence to complete a gap analysis to identify and document the main gaps and areas for improvement and develop emerging themes and priorities. These priorities are outlined in this report for each of the workstreams, but most can be summarised under the following themes:

- Children's mental health is everyone's business.
- Support needs to be accessible.
- Improved transitions.
- A family approach to support.
- Strength of the relationship is key.
- Personalised care.

Following completion of the gap analyses and agreement of the priorities, the Programme is on track to move forward in line with the planned timescales:

- Phase 4 Options development and analysis: March-May 2024
- Phase 5 Transformation/change planning: June-November 2024
- Phase 6 Decision making and system planning: December 2024-March 2025
- Phase 7 Transformation/change delivery: April 2025-September 2027

Whilst Lincolnshire CYP already benefit from a good range of mental health services that provide support from early intervention to crisis, these clear emerging priorities for future transformation will enable us to focus activity, workforce, funding and other resources better in the future.

Through the work that has been undertaken so far, along with currently planned developments and pilots, we will have a sound understanding of the needs and wishes of our stakeholders and be well informed to make changes that will continue to improve access and support for CYP, and enable services to meet their emotional and mental health needs in the future.

#### **Actions Required:**

The Children and Young People Scrutiny Committee is invited to:

1. review the content of this report and the work that has been undertaken so far as part of the Children and Young People's Mental Health Transformation Programme.
2. provide feedback on the work of the Programme so far and advises on any future considerations as part of the next phases of the Programme.



## 1. Background

### Current Commissioning and Provider Arrangements

Lincolnshire County Council (LCC/the Council) Children's Services is the delegated lead commissioner for Children and Young People's (CYP) mental health services in Lincolnshire, on behalf of NHS Lincolnshire Integrated Care Board (ICB).

Lincolnshire Partnership NHS Foundation Trust (LPFT) provides the majority of mental health services for CYP and is rated 'Outstanding' by the Care Quality Commission. LPFT's CYP services are funded via a pooled budget with contributions from the ICB and the Council. Below is a list of locally commissioned CYP mental health services.

Service	Details
<ul style="list-style-type: none"> <li>• <b>Online Mental Health Support Service</b> for young people aged 11 to 18 years (25 SEND/Care Leaver) living in or attending education in Lincolnshire. This is an anonymous service where young people can self-register and access online counselling support, text messaging support, message boards, forums and advice on a wide range of emotional wellbeing and mental health concerns. 5,280 hours of support per year are commissioned.</li> </ul>	<p><b>Commissioned by:</b> LCC/ICB</p> <p><b>Provided by:</b> Kooth Digital Health Ltd.</p> <p><b>Funding in 2023/24:</b> £295,000</p>
<ul style="list-style-type: none"> <li>• The <b>Here4You Access Team</b> is a single point of access for LPFT CYP services (including a self-referral route) through a telephone line offering clinical advice, support and signposting, and screening of all new referrals. There is also an online referral mechanism.</li> <li>• <b>Healthy Minds Lincolnshire (HML)</b> works in schools and communities to provide early intervention support 1:1 and in groups and prevents emotional wellbeing concerns escalating to mental health issues.</li> <li>• <b>Mental Health Support Teams (MHSTs)</b> are a new nationally prescribed model of emotional wellbeing support in schools and colleges which are part of the national drive to improve access to mental health care for CYP. Lincolnshire has four fully operational teams (Lincoln, Gainsborough, Boston, Skegness) and five more planned/in progress (Spalding, Grantham, Sleaford, North Kesteven and South of Lincoln).</li> <li>• <b>Grief and Loss Counselling Support</b> for school-aged CYP who are experiencing grief and loss through death, divorce, separation, illness, crisis etc. (commissioned by LPFT from Lincolnshire Centre for Grief and Loss)</li> <li>• <b>Child and Adolescent Mental Health Service (CAMHS):</b> <ul style="list-style-type: none"> <li>○ <b>Core CAMHS</b> offers therapeutic interventions by a range of professionals such as mental health practitioners, psychiatrists, and psychologists for CYP with moderate to severe concerns including but not limited to depression, anxiety, post-traumatic stress disorder, trauma and self-harm.</li> </ul> </li> </ul>	<p><b>Commissioned by:</b> LCC/ICB</p> <p><b>Provided by:</b> LPFT</p> <p><b>Funding in 2023/24:</b> £18,890,000</p>

Service	Details
<ul style="list-style-type: none"> <li>○ <b>Community Eating Disorder Service (EDS)</b> offers interventions for CYP with Anorexia Nervosa, Bulimia, binge eating and atypical eating disorders.</li> <li>○ <b>CAMHS Learning Disabilities (LD) Team</b> offers interventions for CYP suffering with mental health problems who have a diagnosed learning disability.</li> <li>○ <b>Complex Needs Service</b> In 2020/21, Lincolnshire successfully bid to NHS England (NHSE) Health and Justice and is the regional vanguard for delivering the Framework for Integrated Care (Community). Funding is confirmed to 2028. The Complex Needs Service uses a multi-disciplinary approach to support CYP with complex needs and trauma, including children in care, adopted children, and children open to or at risk of entering the youth justice system, mainly providing training, consultation, formulation and in some cases direct intervention.</li> <li>○ <b>CAMHS Crisis and Enhanced Treatment Team (CCETT)</b> offers 24/7 crisis response and intensive home treatment to prevent inpatient admissions or support CYP transitioning out of inpatient services.</li> <li>○ <b>CYP Keyworking</b> supports children aged up to 25 who have a learning disability and/or are autistic and at high-risk of being admitted to specialist inpatient services, or already in a specialist inpatient bed.</li> </ul>	

### **CYP Mental Health Transformation Programme**

In recognition of the increasing pressures on CYP mental health services and national developments, it was agreed in 2022 that a large scale CYP Mental Health Transformation Programme would commence that will ultimately re-shape local services based on the needs of Lincolnshire CYP. There are a wide range of stakeholders actively engaged in the Programme including CYP, parents/carers with lived experience, the Council, ICB, NHSE, LPFT, GPs, education settings, Children’s Services professionals and Voluntary, Community and Social Enterprise (VCSE) organisations. The Programme’s vision is:

*“Together with CYP in Lincolnshire, we will understand how we can best support their emotional wellbeing and mental health and transform and improve services enabling CYP to live independent, safe, well and fulfilled lives in their local communities.”*

### **Aims**

We will focus on improving support for CYP and their families in relation to:

- Public mental health promotion, prevention, community and early intervention support.
- Empowering parents/carers and professionals working with CYP to better identify and respond to their emotional wellbeing and mental health concerns.

- Increasing and improving access to community based emotional wellbeing and high-quality, evidence-based and timely mental health assessment and support.
- Avoiding unnecessary specialist and acute mental health related hospital admissions, particularly for CYP with LD and Autistic CYP.

### Objectives

The transformation programme will consider a wide-range of cross-cutting factors, including:

- Understanding needs across Lincolnshire, equalities and population health management.
- Ensuring there is the right capacity and skills of community support and mental health trained professionals to meet the needs of Lincolnshire CYP.
- Engage CYP and families and ensuring their views are used to help shape and co-produce services.
- Ensuring professionals work together, supported by integrated pathways, to provide the right support to CYP at the right time and remove barriers to co-delivery of support.
- Making the best use of the funding, workforce and other resources available to us so that services are sustainable and represent best value.

### Programme Governance

A dedicated governance structure has been developed for the Programme, including a Programme Oversight Group that ultimately reports to the Integrated Care System 'Mental Health, Dementia, Learning Disability and Autism (MHD/LDA) Alliance Executive Group'.

### Programme Pathway Workstreams

- **CYP Mentally Healthy Communities and Community Assets** (Prevention) – Ensuring CYP stay healthy through public mental health promotion and prevention by building resilience, creating mentally healthy communities and maximising community assets and support/advice, including online and digital.
- **CYP Early Intervention** – Problems must be identified early and all CYP who need help, including those with complex needs, need to be able to access timely and effective support or advice at the right level, in school or in their communities.
- **Mental Health Support for Learning Disabled and Autistic CYP** – CYP with Learning Disabilities or Autism who are also suffering from mental illnesses must be able to receive specialist care that is tailored and able to meet their specific needs in the community and wrap around their lives, care and education as they transition into adulthood.
- **CYP Community Specialist Mental Health** – All CYP who are suffering from mental illnesses must be able to receive timely assessment and evidence-based treatment to improve their mental health that wraps around their lives, care and education including as they transition into adulthood, within their communities.
- **CYP Urgent and Emergency Mental Health** – Responsive assessment and support for CYP in mental health crisis must be available 24/7 in Lincolnshire's acute hospitals, the community or at home, with appropriate treatment to avoid admission to specialist mental health units, facilitate prompt discharge or support.

## Timescales

Phase	Timescale
<b>Phase 1 Programme Setup:</b> Initial engagement completed	March 2023
<b>Phase 2 Information gathering:</b> Targeted engagement, data and intelligence analysis, benchmarking/best practice, service mapping/statutory duties	April-November 2023
<b>Phase 3 Information and gap analysis:</b> Review and analyse all information, identify gaps and opportunities, agree priorities for improvement	December 2023-February 2024
<b>Phase 4 Options development and analysis:</b> Develop transformation options to deliver agreed priorities for improvement, agree preferred options for recommendation	March-May 2024
<b>Phase 5 Transformation/change planning:</b> Develop transformation plans for each change initiative, financial planning, operational/HR/estates change planning, digital/system change planning, undertake Equality Impact Assessments/Data Privacy Impact Assessments	June-November 2024
<b>Phase 6 Decision making and system planning:</b> LPFT, LCC and ICB decision-making	December 2024-March 2025
<b>Phase 7 Transformation/change delivery:</b> Change planning and activities commence and continue for 2-3 years	April 2025

### Initial and Targeted Engagement (Phases 1 and 2)

#### Summary of Engagement Findings

Across the initial and targeted engagement during Phases 1 and 2 of the Programme, a wide range of insight was gathered in relation to stakeholders' views and feelings in relation to CYP mental health support. A number of key themes were evident throughout the engagement and across a number of different stakeholders. These include:

- That **waiting times** to receive support need to be reduced, they are currently too long. In addition, there needs to be more contact and support for CYP and parents/carers whilst they are waiting to receive interventions/treatment.
- There needs to be more and easier **access to support**, with simpler referral processes and clearer requirements, as it is currently challenging to understand criteria for getting support from services and it is too restrictive. There should be more support for parents/carers. Parents/carers and professionals need more self-help and peer support. Assessments should be more personalised.
- More effective and regular **communication** is needed, CYP and families do not always feel heard or listened to and are not always clear on what will happen following assessment. Parents/carers did not always feel involved in the assessment, treatment plan, discharge processes.

- Parents/carers and professionals would like more **training and education**, particularly free mental health awareness training and understanding Learning Disabled and Autistic (LDA). This includes more training for schools and professionals to increase their confidence in recognising and managing mental health needs, and training to improve parents/carers confidence in supporting CYP's mental health needs.
- We need to improve **transitions**. Stakeholders said that transitions from children to adult mental health services needs to be more gradual, and that there also needs to be a 'fast-track' back into services for support if required after being discharged.
- There needs to be **broader and more flexible support**. CYP want to be seen in their community or close to home, or parents/carers would prefer them to be seen at home or in education settings, and there needs to be more support available out of hours. Stakeholders feel that services are too prescriptive and want more personalised support and a greater variety of therapies. For CYP moving between teams and services their support should be consistent.

### Initial Engagement

During the initial Phase 1 programme setup, the Programme Team took the opportunity to undertake some widespread engagement to support the initial workstream conversations. This Phase 1 engagement included:

- Six **face-to-face and virtual engagement events**, which were attended by young people and parent/carers.
- **LPFT CYP mental health staff engagement events**, attended by 140 LPFT staff.
- **Online stakeholder surveys**, for CYP, parents/carers and professionals (c.300 responses).

As part of the analysis, several key themes emerged:

- **Training and education** around mental health – stakeholders wanted increased widespread awareness of mental health through greater promotion and use of media, free and easy access to training for schools, professionals and parents/carers to increase their confidence in recognising and supporting young people with mental health needs, as well as autistic CYP.
- More **access to support** – stakeholders feel that criteria to access services should be broader and clearer, that support for parents/carers needs should also be available, that more self-help and peer support needs to be readily available and understood for professionals to signpost young people and parent/carers, that the referral process should be easier to understand and a simple process for anyone wanting to refer but also contain the information services need to offer the right response first time, and that support should be accessible out of hours.
- **Shorter waiting times** for support – stakeholders feel that waiting times are too long, that support needs to be available at the right time but also that some type of support needs to be on offer to young people and families whilst waiting, including regular check-ins.
- **Better transitions** between services – stakeholders said that transitions from CYP to adult mental health services needs to be more gradual, and that there needs to be 'fast-track' transition back for support if required after being discharged.

- **Improved communication** with young people and families was a general theme – stakeholders made comments about sometimes not feeling heard or listened to.

### **Targeted Engagement**

During Phase 2 of the Programme, most workstreams each undertook targeted engagement to follow up on issues or concerns raised that were specific to that workstream:

- **CYP Mentally Healthy Communities and Community Assets (Prevention)** – Shine Lincolnshire was provided a small grant to undertake countywide engagement with the VCSE sector in Lincolnshire, as well as CYP and parents/carers. They held 75 open sessions throughout January and February 2023 where participants were asked to share their thoughts on what was available within their communities, what barriers they faced in accessing some groups/clubs and what would be helpful going forward. The responses at the events included 603 participants; 136 from parents/carers, 467 from CYP. Online survey data provided additional statistical data for the project with a total of 272 online responses received; 164 from parents/carers and 108 from CYP. Some of the key messages included:
  - That CYP want more groups/clubs held in local areas, but not school.
  - Information, advice and guidance that can be explored or accessed without referrals and waiting lists, i.e. drop-in sessions.
  - There needs to be alternative groups/clubs in addition to competitive sports.
  - CYP suggested animal therapy groups, arts and crafts, cooking and music groups.
  - There needs to be more specific groups and parent/carer support groups for LGBT, SEND, neurodivergent CYP and more groups for young people (14+).
  - More peer support and networks for CYP and parents/carers.
  - A publication or directory of what groups, clubs or activities are available locally.
  - Community-based workshops, particularly around managing anxiety and self-harm for CYP and parents/carers.
  - Free activities including access to leisure centres.
  - Clear training offer for the staff who support clubs and/or activities, particularly to improve accessibility for CYP with neurodiversity and SEND.
- **CYP Early Intervention** – the workstream undertook targeted engagement via a survey for parents/carers around information and access, which received 54 responses, as well as a survey for education setting staff around the training offer, which received 34 responses. Some of the key engagement findings around early intervention included:
  - Parents/carers would like to access school support first and want more information about identifying signs and symptoms, and information in relation to anxiety and emotional regulation.
  - Parents/carers would like to receive/access information online, which is easily accessible and can be accessed anytime.
  - The online offer is valued and has many benefits, but equally some people do want a face-to-face offer.

- Barriers to access include waiting times and professionals not having the same concerns as parents may have.
- Education colleagues are not always aware of the training on offer, have limited capacity to attend training and would like training/information on how to access services.
- Education settings want pre-recorded training sessions to support fitting workload around training and would benefit from more information/better communication about training, the ability to 'ask a question/have a chat with someone' was highlighted.
- Education settings value the LPFT website, workshops and assemblies and the 'bespoke offer' to their setting.
- Service feedback consistently highlights positive relational aspects of care, which CYP and families regard as important and value, as well as being able to talk to someone and access support quickly via the CYP Access Team.
- Service feedback highlights that parents/carers want more information and feedback regarding their child.
- **Mental Health Support for Learning Disabled and Autistic (LDA) CYP** – the workstream conducted targeted surveys that were widely publicised during May and June 2023, these included parent/carer and professional surveys. In addition, direct contact was made with ten community groups with LDA lived experience, 17 independent schools and Young People's Learning Provision. In total, over 100 CYP, parents/carers and professionals responded. Responses indicated that:
  - CYP with LDA want to be able to get more help from their families, want their teachers to be supported around their needs, including mental health needs, more support for CYP mental health workers in relation to LDA.
  - They want more face-to-face group activities as well as to receive support in familiar settings.
  - These CYP need more support to develop practical coping mechanisms, such as breathing exercises, additional access to a mental health app, a range of different therapies.
  - They would like longer periods of support, with repeated and revisited strategies.
  - Parents/carers want better communication, increased accessibility for CYP with a wider range of service and treatment options, including group opportunities, support and training for staff working with CYP with LDA, and more information for parents/carers at the point of diagnosis and throughout their children's mental health journey.
  - Professionals want more information to support signposting to mental health support/services, including websites, and greater development of 'Reasonable Adjustments' to better support CYP with LDA and other SEND.
- **CYP Community Specialist Mental Health** – the workstream completed targeted engagement about specialist mental health support with parents/carers and the education sector. A targeted survey was aimed to capture views about waiting times and the support offered by services during this period, also the understanding of availability of resources to support whilst waiting. The survey went out to all schools in Lincolnshire, and received 24 responses, 79% of those were from primary education. 35 responses were received to a wider survey about

specialist mental health support, with 86% of responses from parent/carers. Topics highlighted were that:

- Lengthy waiting times are a problem.
- Treatment plans need to be more personalised and specific to the CYP and their needs and environment.
- There needs to be more support for parents/carers to support CYP.
- Staff need to be more supportive throughout the journey.
- Education settings would like more information on eligibility and the referral process, greater clarity on what support they can access while a young person is waiting for specialist mental health treatment, and more support on CYP and self-harm.
- There is greater disengagement from services for ethnic minority CYP and amongst teenage boys.
- More mental health support is required for transgender young people.
- **CYP Urgent and Emergency Mental Health** – the workstream undertook a deep-dive into existing service feedback and learning from incident reviews and other evidence. In addition, the Peer Support and Involvement team held open conversations with young people and families about their experience of accessing crisis support, they spoke to 16 people (seven parents/carers and nine young people). The key areas of feedback that emerged were:
  - There needs to be more effective communication, particularly with parents/carers, about their child and their ongoing care/treatment.
  - A 24 hour crisis number would be appreciated for middle of the night emergencies that do not require attendance at A&E.
  - More accessibility to children's eating disorder support, particularly for earlier support and for non-typical eating disorders/disordered eating.
  - Earlier planning and more use of after-care entitlement under Section 117 of the Mental Health Act, including ongoing access to treatment.
  - More support for parents/carers when their child is in crisis, both to better support the CYP and support for the parents/carers own mental health.
  - Greater consideration of appointment times around the school timetable.
  - A lead worker for each CYP in crisis services, due to shift work it is often inconsistent, which makes relational aspects of support challenging.
  - More information on how autism and ADHD can impact mental health.
  - Smaller professional groups to support the family or allocated worker.
  - Increased support required in services outside of mental health service offer, for example acute hospitals.
  - Care plans need to be more personalised and tailored to individual CYP.

Throughout Phases 1 and 2 of the Programme, there have been challenges and concerns about low response rates to surveys and consistent engagement with education settings and GPs in Lincolnshire. In order to ensure we receive the valuable input from these key stakeholder groups, we are conducting specific engagement around the emerging priorities at the March Lincolnshire Leadership Briefings, through an interactive engagement session with education leaders across all phases of the sector. The joint LCC and LPFT Programme Senior Responsible Officers (SROs) are also meeting with the



Lincolnshire Local Medical Committee to ensure we capture the views of GPs at this critical stage in the Programme.

### **Performance and Population Needs Data (Phase 2)**

A significant exercise was undertaken to gather and collate a wide range of data in relation to CYP mental health needs nationally and locally, including demographic and population needs data, health inequalities information, local trends and performance data. These were collated into data packs and included general data for Lincolnshire and specific packs for each of the workstreams to review and analyse as part of Phase 2 of the programme.

#### **Summary of Performance and Population Needs Data Findings**

- CYP are disproportionately facing health inequalities compared to adults; most lifelong mental illness is established by adolescence and many vulnerable CYP are likely to face health inequalities, including mental illness.
- Lincolnshire CYP living in poverty aligns to national averages; 6.5% of Lincolnshire CYP live in some of the most deprived areas, yet demand for mental health services does not align to deprivation, in Lincolnshire the least deprived areas have the highest demand.
- Higher numbers of Lincolnshire CYP have an Education, Health and Care Plan (EHCP) and receive SEN support, and less CYP achieve high GCSE grades.
- There has been an increase in care experienced CYP; we know they are more likely to experience poor mental health outcomes, but less are accessing local mental health services. This could be linked to more wrap around care in Council owned care settings.
- Significantly less CYP are in contact with local mental health services than expected prevalence would indicate have a mental health condition. Lincolnshire needs to focus on increasing access to CYP mental health services to meet NHSE targets but there are already some plans in place to increase access and improve performance reporting where current contacts are not being counted.
- CYP mostly access the Online Counselling Service out of hours. More CYP are using the service for longer than before and the needs of CYP accessing the service are reportedly higher than before the pandemic.
- More females than males are referred and open to services (except in LDA services), despite more males being likely to have a mental health disorder at a primary age.
- Parents and carers are the highest referrers to LPFT services. The introduction of self-referral is positive as this enables a higher quality of referral reducing delay in support.
- Increased referrals to services have been noted since the pandemic. This has increased waiting times for support, particularly in Healthy Minds Lincolnshire and CAMHS; while referrals are reducing and waiting times improving, there is not a reducing number of CYP open to CAMHS for treatment. LPFT has introduced workers to support CYP with advice and resources whilst waiting.
- CYP are mostly referred to early intervention services in Lincolnshire for anxiety and stress; across all LPFT CYP services (excluding crisis) anxiety, low mood and behavioral problems account for 90% of referrals.
- There has been an increase in CYP crisis referrals and there has been a rise since the pandemic of inpatient admissions, although not to the same extent as nationally.

Urgent and emergency referrals are being responded to quickly, admissions avoided for CYP with LDA. There has been no admission for CYP with LDA since April 2023.

- Lincolnshire has lower hospital admissions for CYP mental health and less inpatient admissions than region/national figures.
- Pressures in CYP mental health services are also a national issue.

### **Health Inequalities**

Childhood and adolescence are key life stages where people face inequalities in health outcomes alongside inequalities in accessing services:

- Around a third of CYP in the UK live in poverty and are at risk of poorer health outcomes; CYP in lone parent families, larger families and from minority ethnic groups are more likely to live in poverty.
- Children in care (CiC), ethnic minority young people, LGBTQ+ young people, disabled CYP, people with mental health conditions, young carers and young people known to the criminal justice system are also more likely to experience health inequalities.
- Most long-term conditions are developed in childhood. The UK has one of the highest rates of CYP with a long-term condition (23% in 2020), and 75% of mental health problems become established before the age of 24.
- In England, the rate of infant mortality is 2.4 times higher in the most deprived areas. Deaths at this age are largely preventable.
- Year 6 children living in the most deprived areas of England were twice as likely to be classified as obese in 2021/22. It is known that CYP with obesity may go on to develop health conditions later in life, such as diabetes, heart disease, cancer and mental illness.
- There are also inequalities in how CYP access healthcare services. Children under the age of five from more deprived areas are more likely to attend A&E services, and 'Did Not Attend' (DNA) rates are higher for children in areas of higher deprivation.
- The Covid-19 pandemic disproportionately impacted the health and wellbeing of CYP, with NHS waiting lists for CYP having grown at a much faster rate than adults (64% compared to 43%).
- Demand for CYP mental health services has grown, with an 81% increase in CAMHS referrals between 2019 and 2021, compared to an 11% rise in referrals in adult mental health services.

### **Population needs data**

- Based on national data, around 20,700 CYP are expected to have a diagnosable mental health condition in Lincolnshire, whilst only 8,290 (as at December 2023) were in contact with services.
- More males aged 6-10 are likely to have a mental health disorder.
- More females aged 17-23 are likely to have a mental health disorder.
- More LGBTQ+ CYP are likely to self-harm or attempt suicide.
- There is higher demand for services in the North and South Kesteven areas, which are some of the least deprived areas across Lincolnshire. East Lindsey has the lowest referrals but the most deprived wards, however less CYP live there.

- There is a high prevalence of anxiety/stress amongst CYP in Lincolnshire. This is the highest referral reason for CYP accessing Healthy Minds Lincolnshire, MHSTs and Kooth.
- The highest number of referrals for CYP are across Key Stages 2, 3 and 4 (7-16 years).
- Significantly more females are open to mental health services (except for CYP with a learning disability), whilst significantly more males are open to exclusion support services e.g. Behaviour Outreach Support Service (BOSS), and Alternative Provision.
- Lincolnshire has lower CYP hospital admissions for mental health and self-harm than other areas regionally and nationally.
- The CYP inpatient rate for specialist mental health units is lower than regional and national figures but has risen in Lincolnshire. In 2022/23 there were 25 CYP admitted to mental health inpatient units with a combined stay of 1,482 nights.
- Around 14-17.8% of CYP in Lincolnshire live in households with below average income, and 11.6% of CYP under 16 (15,335) live in absolute low-income families.
- 6.5% of CYP in Lincolnshire live in the 10% most deprived areas nationally.
- 25.1% of CYP under 11 years of age and 19.2% of CYP aged 11-18 are entitled to free school meals.
- 107,000 pupils attend school in Lincolnshire, with 14.63% accounting for all other ethnic groups besides white British combined.
- 90.8% of school-aged CYP in Lincolnshire attend a school setting.
- Approximately 2,300 CYP attend a special school in Lincolnshire.
- Approximately 1,500 CYP in Lincolnshire are home educated, of which most are not open to social care, therefore there is little professional oversight of these CYP.
- 2.1% of 16-17 year olds in Lincolnshire are not in education, employment or training (NEET), which is lower than the England and East Midlands averages.
- Lincolnshire has a below average attainment-8 score (GCSE).
- 13.3% of Lincolnshire pupils in mainstream schools received SEN support in 2022, which is above the regional and national averages.
- There was an increase in new Education, Health and Care Plans (EHCPs) between 2019 (5,200) and 2022 (6,600) and this has continued to rise.

### **Vulnerable CYP and families in Lincolnshire**

- There has been a 10.5% growth of Children in Care (CiC) in 5 years.
- There are around 2,000 young carers, with parental mental health being the second highest reason for young people becoming a carer.
- A third of CYP in the UK live with a parent with mental ill-health, around 7% of which live in lone-parent households.
- 10-15% of CYP in the UK live with parents with a mental disorder.

### **Access to CYP Mental Health Services**

- NHSE has access targets for mental health services which are monitored and published nationally. The expected prevalence of mental health concerns are calculated based on population size and an access target determined for each area.
- As at December 2023, 8,290 CYP received one or more contact from a mental health service in the previous 12 months. NHSE set Lincolnshire's target as 9,017 in

2023 based on its population size. During 2022/23, Lincolnshire showed a consistent increase in access but not at the rate required to achieve the target. A Recovery Action Plan (RAP) is in place in 2023/24.

- Many areas nationally are not meeting their access target and it is considered that there are some limiting factors in the target setting and reporting of data:
  - MHSTs provide the biggest service growth nationally. NHSE is increasing the access target at a faster rate than new MHSTs can be operationalised (two years as per the NHSE model).
  - Unlike many areas, Lincolnshire's system has agreed not to report general Autism related contacts as this is not felt to be appropriate.
  - Some local services cannot currently report their data into NHSE's system and so reported access is below actual access. A data analyst has been recruited in LPFT to support Lincolnshire to rectify this and improve Lincolnshire's reported performance.
  - There are several new services being explored that will provide more opportunity to increase access for CYP including community VCSE sector support, alternatives to cognitive behavioural therapy (CBT) and game-based therapy for CYP with anxiety.
  - MHSTs are also continuing to roll out and this will increase access.

### **Online Mental Health Support**

- Kooth accounts for around 11% of Lincolnshire's mental health access figure.
- 94% of CYP consider Kooth to be a safe, responsive, non-judgemental environment and would recommend Kooth to a friend.
- At April 2023, 68% of CYP used the platform outside of normal office hours.
- CYP from Lincoln and Boston access the platform more than other areas of the county, which include some of the most deprived wards and ethnic minority groups of CYP.
- The number of CYP using Kooth reduced by 21.6% between 31 March 2020 and 31 March 2023 but evidence shows increased usage per CYP; an average of 14 logins per CYP in March 2023.
- At April 2023:
  - 74% of CYP were utilising the offline messaging function.
  - 18% of CYP were accessing the online counselling support.
  - 93% of CYP were accessing articles, forums, journals and self-help content.
- There has been a reported increase in the acuity of need of CYP accessing online mental health support. Kooth reporting shows 31% of CYP presenting with suicidal ideation, however this has decreased since December 2022.

### **LPFT CYP Mental Health Services**

Here4You Advice Line and Access Team:

- With an average of 415 contacts per quarter, parents/carers are the highest and then education settings, GPs and Children's Services; 4% of contacts are from CYP.
- An average of 1,513 referrals are screened per quarter with parents/carers being the highest referrers and then GPs and education settings.
- On average, 71% of referrals are accepted per quarter, with 19.5% provided with advice/signposting with no support needed from services, 8% of referrals are

incomplete (which are followed-up by the access team) and the remaining referrals are not suitable e.g. out of area, too old.

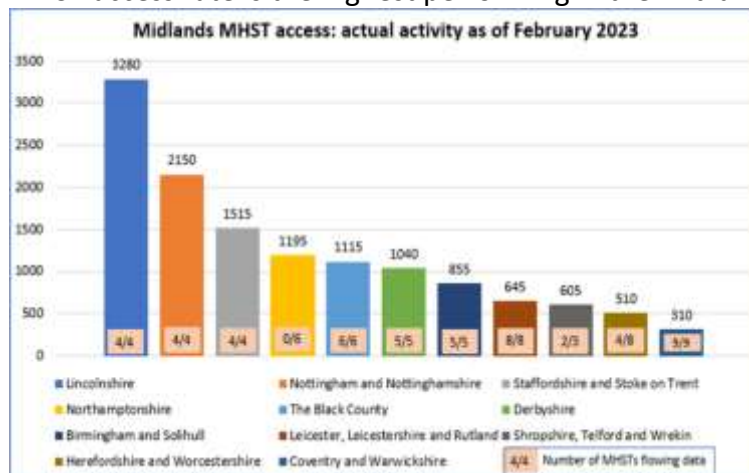
**Healthy Minds Lincolnshire:**

- There have been increased referrals to the service since the pandemic; from December 2021 to March 2023 the caseload rose by 107% from 441 to 915.
- Referrals are reducing from the levels seen immediately post-pandemic however; there was a 31.6% reduction from March to June 2023.
- Improvements in waiting times are being seen; the average wait from referral to assessment in quarter 1 2023/24 was 11.1 weeks and from assessment to treatment was four weeks. 74% of CYP were seen within four weeks following assessment compared to 41.5% the previous quarter and 43.76% of CYP demonstrated positive outcome measures in that period.

**Mental Health Support Teams (MHSTs):**

Lincolnshire MHST Coverage			
Wave	Teams	Area	Status
2	2	Lincoln and Gainsborough	Fully Operational
4	2	Boston and Skegness	Fully Operational
7	1	Spalding	Went live Jan 2024
8	2	Grantham and Sleaford	Went live Jan 2024
10	1	Lincoln South and North Kesteven	Embed from Jan 2025
12	1	East Lindsey expansion	Embed from Jan 2026

- Lincolnshire MHST access rate is the highest performing in the Midlands region.



- There have been increasing referrals to MHSTs, which is highly attributable to new teams becoming operational.
- The average wait from referral to assessment in quarter 1 2023/24 was 1.6 weeks, and the average wait from assessment to treatment was 4 weeks.

CAMHS (including Eating Disorders, LD Team, Crisis and Complex Needs Service):

- The average wait from referral to assessment for the core CAMHS teams in quarter 1 2023/24 was 6.7 weeks. This was 3.95 weeks for CiC and one week for CYP known to the Youth Justice System.
- The average wait from assessment to treatment for CAMHS was six weeks. This was 1.7 weeks for CiC and three weeks for CYP known to the Youth Justice System.
- ICB investment has helped reduced CAMHS waiting times which had increased significantly since the pandemic; there was a 43% reduction in CYP waiting for treatment from May 2022 to September 2023 and a 53% reduction in CYP waiting more than 12 weeks for treatment from May 2022 to September 2023.
- For the Eating Disorder Service, the average wait from urgent referral to treatment in quarter 1 2023/24 was 0 weeks, with 100% CYP seen within one week, and the average wait from routine referral to treatment was one week.
- Since it began, as at quarter 1 2023/24, the Complex Needs Service has accepted around 1,000 referrals, provided consultation and advice to over 1,000 professionals, produced around 350 formulation-based care plans and provided direct intensive assessment and/or intervention to around 60 CYP / parents/carers.
- Within the Complex Needs Service, mental health workers support children's residential care and leaving care service staff to provide support to CiC and care leavers. In quarter 1 2023/24, 44 visits to Council residential care homes and 19 consultations were completed and 44 care leavers were directly supported.
- The Crisis and Enhanced Treatment Team (CCETT) has experienced increased referrals; in quarter 1 2023/24 there were 458 referrals including 16 CYP with a learning disability and/or autistic (LDA) CYP. 84% of referrals were accepted (those not accepted are triaged and signposted to the appropriate service), 94% of emergency referrals were seen within 24 hours and 89% of urgent referrals were seen in 72 hours.
- Since 2013, NHS England has been the responsible commissioner for all CYP inpatient services (previously referred to as Tier 4); in 2021/2022 Lincolnshire saw increased demand for inpatient services (76.3 per 100k population), particularly Specialist Eating Disorder Unit (SEDU) beds, but this was still below national demand (99.8 per 100k population).
- The need for an in-county inpatient unit is often discussed, given increased demand and because Lincolnshire CYP needing inpatient care must access treatment outside of the county which is incredibly difficult for them and their families; in 2022, 21 CYP were placed outside of Lincolnshire but within the East Midlands and the number of children placed in inpatient beds outside of the East Midlands reduced to seven from 15 (-42%).
- In 2022/23, CYP mental health inpatient admission by bed type was:
  - 19 in GAU (General Adolescent Units)
  - 5 in SEDU
  - 1 in Psychiatric Intensive Care Unit (PICU)
- Lincolnshire CYP spent a combined total of 1,482 nights in inpatient care, an average of 59.2 nights per CYP.

Transforming Care (CYP with LDA at-risk of inpatient admission):

- The new CYP Keyworking service commenced in April 2023. The service initially supported those aged up to 18, and is providing support to more than 90% of eligible young people identified on Lincolnshire's Dynamic Support Register (DSR), and recently expanded to the full offer, supporting young people aged up to 25.
- As at quarter 2 2023/24, eight CYP avoided admission and moved from Red to Amber/Green on the DSR following Keyworker involvement.
- As at 27 February 2024, there have been no new admissions for CYP with LDA (under 18) since April 2023 in Lincolnshire.

### **Gap Analysis and Emerging Priorities (Phase 3)**

During the most recent phase of the Programme, all of the information gathered during Phases 1 and 2 have been collated, analysed and summarised. A whole-day workshop was held with the Programme Senior Responsible Officers, Programme Leads, Workstream Leads and members of the Programme Oversight Group to review and discuss the summary of findings from Phases 1 and 2. Following this, the workstreams have completed gap analysis templates to identify and document the key gaps and develop emerging themes and priorities from the information gathering. This has allowed workstreams to consider what transformation or change activity might be required and start documenting this ready for prioritisation and development of transformation/change options. The emerging priorities across each of the workstreams are outlined below.

#### **Summary of Key Themes and Emerging Priorities**

##### **Children's Mental Health is Everyone's Business**

- We need to improve promotion and engagement of education settings, VCSE sector and universal services in supporting CYP mental health (this may include support/consultation and training from mental health professionals to increase confidence and better identify, support and refer CYP/families when concerns arise).

##### **Importance of Clear Communication and Health Messages**

- The branding of CYP mental health services in Lincolnshire needs to be considered (for example, whether we have one service with a single referral route rather than several).
- Communication regarding service offers/information and progression through referral, assessment and intervention needs to be clearer and more effective, with clear points of contact for parents/carers and professionals.
- Information about available support needs to be made as clear, up-to-date and accessible as possible (e.g. for those with neurodiverse needs).

##### **Support Needs to be Accessible**

- We need to continue to increase capacity countywide to see more CYP and families, and reduce waiting times.
- It must be easier to refer, ensuring there is 'no wrong door', and making information/services easy to find, including community groups/support.
- There needs to be increase support available for CYP and parents/carers whilst waiting for interventions to commence.

- More options need developing around methods of intervention and greater flexibility in delivery (for example, face-to-face/digital, time of day/out of hours support, location etc.).

#### **Transitions**

- Mental health transitions between services/support need to be improved, including at key ages (primary-secondary-college, transition at 18 etc.), ensuring age-related transitions are developmentally appropriate.
- We need to improve and develop pathways for transition from mental health services back to support in the community (for example, VCSE groups/clubs/support etc.).

#### **Family Approach to Support**

- Support needs to consider a family approach where appropriate and support/treatment should be informed by the family.
- We need to develop a specific support offer for parents/carers in their own rights for how they can support their young person.

#### **Strength of the Relationship**

- The delivery model needs to be reviewed at all levels to maximise continuity of care and focus on building strong relationships that foster trust/opening up, supporting them only having to tell their story once and not being faced with someone who doesn't know them.

#### **Personalised Care**

- We need improved pathways to properly consider reasonable adjustments across a range of needs and ensure that support/treatment plans are shared and collaborative.
- Assessments and plans need further development to consider a holistic approach to care beyond the presenting mental health need, including how to support those involved in a CYP's care/education in the community.

#### **CYP Mentally Healthy Communities and Community Assets (Prevention)**

- More universal mental health support for parents during pregnancy and postnatally, including early identification, diagnosis and support of postnatal depression.
- More support needed during early years (0-5), including supporting healthy attachments, evidence-based parenting programmes.
- More support for schools in delivering mental health messages and promotion (e.g. emotional regulation, coping strategies and support to help build resilience).
- Funding and support for young people to access community support/groups, including training for VCSE providers, increased capacity/spaces, funding for young people to attend activities, more groups for older ages/neurodiversity.
- Develop a network of peer/social prescribing support for young people, schools, services and VCSE to help them identify and help young people to participate in community support.
- Create a single online space for mental health advice and self-help.



### **CYP Early Intervention Mental Health Support**

- Increase capacity of early intervention services to see more young people and families to better support young people, parents/carers and professionals, including making it easier to refer and addressing disparity between areas with/without MHSTs.
- Increase preventative and early intervention support focused on addressing anxiety, including support to build resilience and advice/self-help available.
- More options in terms of methods of intervention and greater flexibility in delivery e.g. face-to-face or digital, or time of day, location.
- Maximise continuity of care to focus on relationships, especially as young people move between services.
- Improve communication regarding the mental health offer and support offered from referral to assessment and intervention.

### **CYP Learning Disability and Autism (LDA) Mental Health Support**

- Develop a clear, single repository of mental health information, advice, self-help support and signposting for young people with a Learning Disability (LD) or autism and their parents/carers.
- Ensure young people's mental health services are able to adequately support the growing number of children with SEND, particularly those with LD or autism.
- Develop specific pathways across all young people services for those presenting who have autism or low-moderate LD to ensure they receive the appropriate support and that any reasonable adjustments are properly considered to support their engagement and maximise the effectiveness of interventions.
- Improve data recording around young people with SEND so we can undertake more effective analysis and have a better understanding of the needs for these groups.

### **CYP Community Specialist Mental Health Support**

- Develop clinical pathways to enhance the specialist offer, increase training offer to staff in specialist therapies.
- Continue to reduce waiting times and increasing capacity to ensure timely access to support.
- Increase support whilst waiting through review of parent/carer offer, clear point of contact, self-help/online information, workshops/training etc.
- Work with system partners to ensure they have a better knowledge and clear expectations of services/criteria, e.g. information and toolkits for education settings and GPs.
- Consider outreach to diverse/hard-to-reach communities who are less likely to engage in services, e.g. teenage males, ethnic minorities, transgender, children in care etc.
- Review and improve offer for parent/carer/family support to help them understand how to better support their young person.
- Develop a personalised care plan that is developed and shared with young people and parents/carers.

### **CYP Urgent and Emergency Mental Health Support**

- Improve crisis offer for young people and parents when accessing the service any time of the day or night. For example, expanding the Mental Health Liaison offer and fully developing the Mental Health Urgent Assessment Centre model in the north of the county and introducing the same offer in the south of Lincolnshire.
- Develop a day hospital offer and continue to improve the intensive 'hospital at home' model with more community activities such as equine therapy, gardening groups, night light café etc.
- Improve community crisis treatment offer and packages of care offered to keep young people out of hospital, including enhancing the multi-disciplinary offer within the crisis team.
- Develop crisis care pathways and suitable accommodation for CYP needing a brief 'safe' place to stay whilst a package of care is put into place in the community.

### **Transitions**

Transition is a key priority for mental health services that runs throughout all the workstreams. Emerging priorities for the transformation in regard to transition are to improve mental health transitions between services/support, including at key ages (primary-secondary-college, transition at 18 etc.), ensuring age-related transitions are developmentally appropriate. We also need to improve and develop pathways for transition from mental health services back to support in the community, for example VCSE groups/clubs/support etc.

Some of this work has already commenced. LPFT now has CYP Clinical Leads for transition in all of its CAMHS locality teams and urgent care teams (Crisis and Eating Disorders), and are looking to widen the role to its emotional wellbeing services (Healthy Minds Lincolnshire and MHSTs). These Clinical Leads have advanced clinical expertise and skills. The Clinical Lead roles include:

- Leading on transitions for their team and the wider service, ensuring young people have seamless transition in and out of services, including internal transitions between teams in LPFT.
- Supporting the development of a new LPFT internal transition protocol for young people transitioning between CYP and adult mental health services. The new protocol is being co-produced and will be in line with best practice guidelines, where transitions are personalised and developmentally age appropriate.
- Working closely with team coordinators to monitor and lead quality improvement for transitions through clinical supervision and clinical audit.
- Offering specialist knowledge and skills to any assessment and completing risk assessments and care plans to meet the needs of the most complex young people accessing our services.
- Reviewing treatment pathways and ensuring treatment offered is in line with best practice guidelines.

A new transition protocol has been drafted and co-produced with young people with lived experience of mental health transition. A personalised transition plan is now being developed by the lived experience team, which is expected to be completed and implemented by summer 2024. The Clinical Leads will be key to embedding and quality

assuring delivery against the new protocol, either directly or through supervision. The new transition protocol will also ensure that the Clinical Leads will be accessible to adult services as required for specialist supervision or formulation once the young person has transferred and moved to adult services. This allows for their expertise to follow the young person as they move services.

### **Next Stages of the Programme (Phases 4 to 7)**

Once the gap analyses for each workstream have been completed and the transformation priorities agreed, the next phase (4) is to develop the potential transformation options in order to deliver against the agreed priorities for improvement. This will include initial costings, benefits and impact analysis in order to support the Programme Oversight Group to agree the preferred options for recommendation. This is expected to be completed by the beginning of summer 2024.

During summer and autumn 2024, the recommended options for transformational delivery will need detailed planning (Phase 5). The programme team and workstreams will develop detailed transformation plans for each change initiative, including financial planning, operational/HR/estates change planning, digital/system change planning, and undertaking engagement in relation to Equality Impact Assessments (EIAs) and Data Privacy Impact Assessments. This is expected to be completed by the end of November 2024, ready to undertake joint decision-making (Phase 6) across the Council, LPFT and the ICB to agree on transformational change activities and any realignment of workforce or finances, including new funding proposals, that may be required in order to commence transformation activity from April 2025 (Phase 7).

## **2. Conclusion**

It is evident that, whilst Lincolnshire CYP already benefit from a range of mental health services that provide support from early intervention to crisis, there are some clear emerging priorities for future transformation that will enable us to focus activity, workforce, funding and other resources better in the future. Since before the pandemic, increasingly more CYP were needing support with their emotional wellbeing and mental health, which is putting increasing pressure on services.

CYP mental health services in Lincolnshire have had increased investment in recent years, both local and national, which has enabled us mostly to keep up with the increasing demand and manage to reduce waiting times for support following a post-pandemic peak in May 2022. However, there is still further progress needed, which we can only achieve by looking across the whole model of CYP mental health services in Lincolnshire and through making significant transformational change to better equip us to meet the future demand and needs of CYP and families.

Whilst the CYP Mental Health Transformation Programme will take time to be fully delivered, through the work that has been undertaken so far, along with currently planned developments and pilots, we will have a sound understanding of the needs and wishes of our stakeholders and be well informed to make changes that will continue to improve

access and support for CYP, and enable services to meet their emotional and mental health needs in the future.

**3. Consultation**

**a) Risks and Impact Analysis**

Risks and issues to the programme are being managed as part of the programme management approach and significant risk and issues are reported to the Programme Oversight Group and to the CYP Integrated Transformation Board via the Programme Highlight Reports. An impact analysis will be undertaken during Phases 4 and 5 of the Programme (Options Development/Transformation Planning), when possible transformation options are being considered and planned, in order to understand the potential impacts on key population groups, particularly those with protected characteristics.

**4. Appendices**

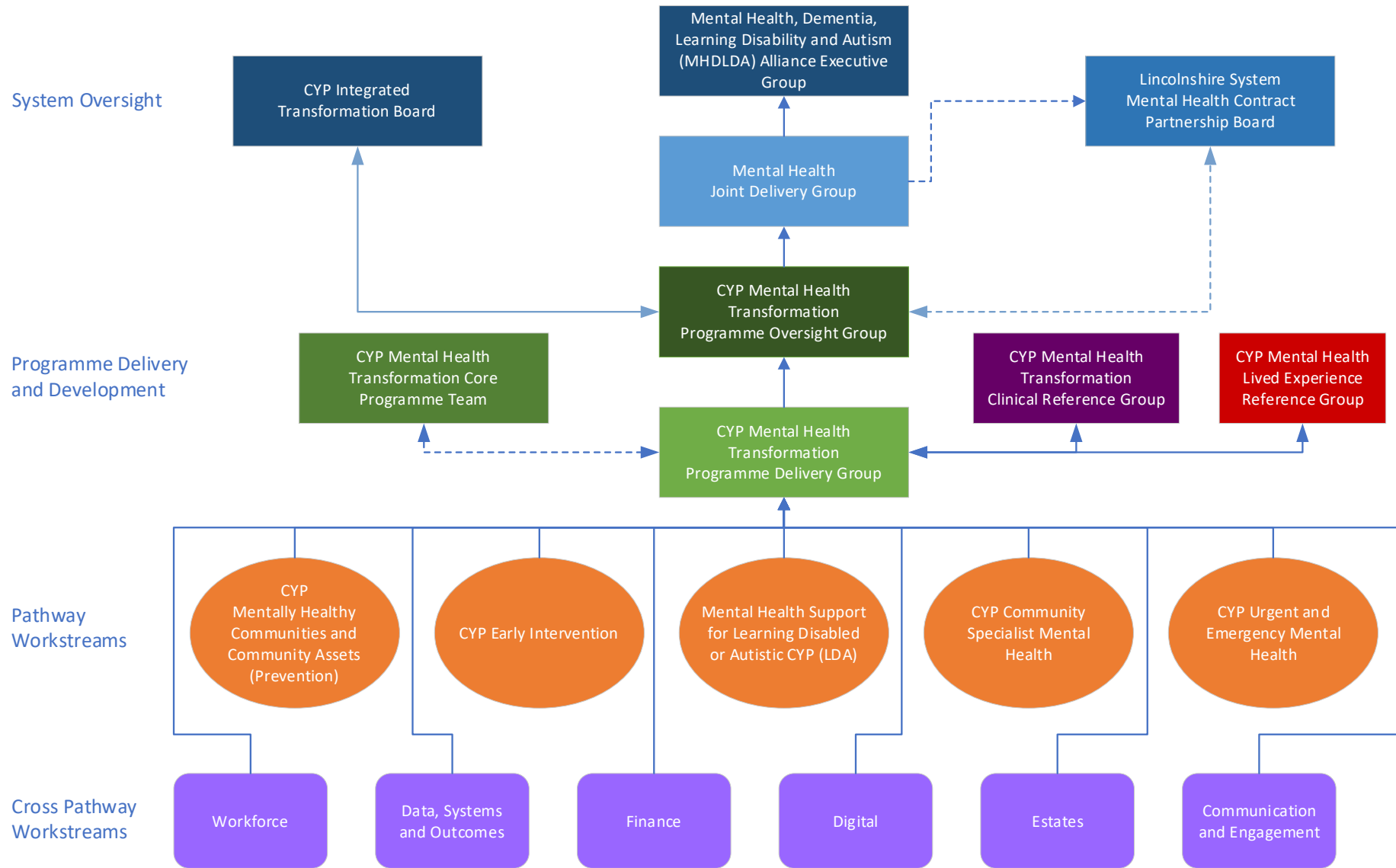
These are listed below and attached at the back of the report	
Appendix A	CYP Mental Health Transformation Programme Governance

**5. Background Papers**

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Kevin Johnson, who can be contacted on 07729 546202 or [kevin.johnson@lincolnshire.gov.uk](mailto:kevin.johnson@lincolnshire.gov.uk).

# Children and Young People's Mental Health Transformation Programme Governance



Programme Governance Group	Description
<b>Programme Oversight Group (POG)</b>	Ensures the delivery of the Programme and its component workstreams, and makes joint decisions about the strategic direction of travel for transformation of CYP mental health services, including: overseeing implementation and monitoring of progress/timescales and risks/issues, making programme level decisions within funding limitations, working across other interdependent MHDLDA programmes to ensure a continuation of high quality practice and alignment across Lincolnshire and receive assurance around the delivery of, and the interdependencies across the various programme workstreams.
<b>Core Programme Team (CPT)</b>	Recommends decisions to be taken to POG about the strategic direction of travel for transformation of CYP mental health services, has oversight of resource and funding allocation/spend, manages programme delivery risks and issues, including mitigation and resolution, manages programme evaluation and reporting requirements and programme communication.
<b>Programme Delivery Group (PDG)</b>	Manages the day-to-day delivery of the Programme, including all aspects of project management and administration associated with the programme management function: activity/progress tracking and reporting, monitoring risks, issues, decisions, actions and interdependencies, project finances and organising workstreams and leading any programme-related events. The PDG escalates any concerns to the CPT and POG, as necessary.
<b>Clinical Reference Group (CRG)</b>	Will ensure that recommendations for changes to services or service pathways because of co-produced redesign and transformation continue to be safe and effective, meeting all clinical guidelines. They will be responsible for highlighting any risks or challenges regarding current or proposed services/pathways that need to be considered.
<b>Lived Experience Reference (LER) Group</b>	A key engagement and co-production group of people with lived experience of CYP mental health services. The group will be invaluable in providing a public voice in transformation and will support across workstreams as required.



**Open Report on behalf of Heather Sandy, Executive Director - Children Services**

Report to:	<b>Children and Young People Scrutiny Committee</b>
Date:	<b>19 April 2024</b>
Subject:	<b>Families First for Children Pathfinder Programme</b>

**Summary:**

This report is provided to enable the Scrutiny Committee to be updated on the progress of the implementation of the Families First for Children Pathfinder Programme in Lincolnshire.

**Actions Required:**

The Committee is invited to review and comment on the development and implementation of the Families First for Children Pathfinder Programme to ensure they are sighted on the scope of the programme and its key objectives.

## **1. Background**

In July 2023, the Department of Education (DfE) formally announced Lincolnshire (alongside Wolverhampton and Dorset) as one of the initial three national Families First for Children Pathfinders. The Pathfinder Programme is sponsored and managed by the DfE and will run between September 2023 and March 2025. Lincolnshire was selected as a Pathfinder in recognition of a long-standing track record as an improvement partner to other local authorities and because of its commitment to sector led learning. The Pathfinder goals are geared towards the creation of a future system where we support families in a new way, enhance their experience and develop a stronger multi-agency and expert child protection response.

Lincolnshire is recognised within the sector as an innovative and transformational authority and through the Pathfinder we are provided with positive opportunities to develop and evaluate new ways of working. Our approach around this has been to explore how existing service delivery and partnership collaboration could be further enhanced from its already solid foundation.

The pathfinder programme has been established as part of the government's children's social care implementation strategy which resulted in the publication of 'Stable Homes built on love' (Appendix A) which set out a response to recommendations from the independent review of children's social care and the Child Safeguarding Practice Review

Panel report on child protection. It provided the foundation for the creation of the Pathfinder Design Specification as a template for Lincolnshire to shape service delivery and the aspirations for how future delivery of services to children and families could be enhanced.

In addition, the Pathfinder programme draws on evidence and existing good practice, including from other government programmes:

- Start for life and Family Hubs.
- Supporting Families.
- Reducing parental conflict.
- Strengthening families, protecting children.

The Pathfinder brings to Lincolnshire approximately £5.7m of new funding over the duration of the programme. This has enabled us to shape plans which will result in the recruitment of up to forty new roles on a fixed term basis within Children Services across a wide range of specialisms, all aligned to our implementation plan. The pathfinder has been created to co-design and test new reforms across the following four work streams:

- **Pillar 1 Multi-Agency Safeguarding Arrangements** - Updated and strengthened local multi-agency leadership through changes to safeguarding partner arrangements. A proposal to progress education being seen as the fourth strategic safeguarding partner.
- **Pillar 2 Family Help** - Locally based, multi-disciplinary family help/early help services, providing intensive, non-stigmatising and effective support that is tailored to the needs of children and families.
- **Pillar 3 Child Protection** - A child protection response conducted by social workers with greater expertise and experience, and access to dedicated and skilled multi-agency input, working with Family Help to protect children who are suffering, or at risk of suffering, significant harm.
- **Pillar 4 Family Networks** - Greater use of family networks, with increased use of family group decision-making, facilitated by financial support through Family Network Support Packages to remove any financial or practical barriers family networks may face.

### **Key Progress and Milestones**

Following the announcement of Lincolnshire's status as a Pathfinder, there has been significant activity undertaken to fulfil the requirements and challenging timeframes set out by the DfE. This has resulted in the establishment of a dedicated project team and Pathfinder governance structures at both an executive and strategic level which includes our key partners to ensure their support and engagement within the programme. Partnership support to the programme has been invaluable and key roles within the project team have been established through secondments with Lincolnshire Police and the Integrated Care Board (ICB).

In addition, we have created a seconded head teacher role to ensure a dedicated focus on progressing our operational and strategic engagement with the education sector. At the outset of the programme, we have mapped our existing service offer and structures



against a design specification provided by the DfE, whilst then embarking upon an intense period of co-design in collaboration with our partners. This resulted in the development of a comprehensive implementation plan and an accompanying costed plan to set out how the grant funding would be used to achieve the programme objectives.

In Lincolnshire, extensive work has been undertaken in collaboration with key government agencies and local partners including Police, Health, and Education. The support and commitment of our local partnership agencies should be recognised and valued. It has promoted closer working relationships, explored creative solutions, and undoubtedly facilitated positive progress to this point and is clearly a strength of our multi-agency arrangements within Lincolnshire.

## **Implementation Plan – Key Features**

### **Pillar 1 – Multi Agency Safeguarding Arrangements**

- The focus of the work within this pillar has been centred around the changes to Working Together 2023 and identifying new options around the arrangements for the Lincolnshire Safeguarding Children Partnership (LSCP) chair and how independent scrutiny will be provided across the Childrens' partnership.
- The appointment of a dedicated education coordinator role at headteacher level is enabling us to explore the possibilities and options around proposals for how education can engage as a fourth strategic safeguarding partner.
- Wide ranging work is being undertaken to improve information and data sharing across the partnership. We are providing additional capacity to support and equip staff with the knowledge and skills required to develop and trial the new ways of working.

### **Pillar 2 - Family Help**

- Through new recruitment in Family Help roles and increased resources, we are enhancing our support to external lead professionals to maximise their impact and minimise the potential for cases to escalate.
- We are providing additional resources through recruitment to support early years settings to reflect the specific needs of this cohort even sooner and promote the benefits of early intervention.
- We are committed to extending support to lead professionals around building family networks to create increased resilience and in building family network plans.

### **Pillar 3 - Child Protection**

- The focus in this pillar is the development of new multi-agency child protection teams (MACPT) and ensuring all social workers and other key practitioners are skilled and confident in this critical area of practice. This will be supported by specialist joint training and new requirements around knowledge and skills assessment for Social Worker's career progression.
- Additional support around education has been created through the establishment of four new Education Progress co-ordinator roles to work with children with an

allocated Social Worker. The roles will be a vital conduit in our engagement with education settings and in supporting schools around child protection and strategy meetings.

- Information sharing and collaboration will be enhanced by the creation of a new social worker co-ordinator role within the Police Safeguarding Hub at Grantham.
- We have provided the opportunity to re-model the roles of the Child Protection (CP) Chair and Independent Reviewing Officer (IRO). The CP chair will provide a dedicated and crucial knowledge, expertise, and guidance within the newly established MACPT and become key advisors around casework.

#### **Pillar 4 - Family Networks**

- Within this pillar, we are committed to ensuring we continue our commitment to ensuring the use of Family Network meetings and maximising their benefits.
- This is also underpinned by the recruitment of additional Family Group Conference (FGC) Co-ordinators and supervisory staff to expand the offer across a wider cohort of families.
- DfE has provided Lincolnshire with ringfenced funding to provide financial support packages to family networks. This is geared towards promoting stability, and avoiding escalation to enable children remaining within the family home wherever possible and the funding can be used to provide innovative financial solutions within the family network to support this goal.
- A robust structure and process to support the Family Network Support Packages (FNSP) payments is being developed to ensure transparency, fairness, and compliance with existing regulations.

#### **Communication and Engagement**

Throughout the programme, we have sought to ensure clear communication with all the recognised stakeholders. This has included dedicated sessions within Children's Services staff briefings and team managers as the programme has developed. In addition, we have also embarked upon engagement within the Lincolnshire Safeguarding Children's Partnership in key forums to promote awareness. Communication and engagement planning has been undertaken with the key strategic partners to ensure a consistent approach and consistent key messages across all strategic partners. Finally, the Pathfinder has featured within all the recent briefings to education leads and head teachers across the county to highlight their ability to support the programme and understand its objectives.

#### **Evaluation/Oversight/Governance**

The DfE has now commissioned an independent evaluation partner to assess the impact of the programme, and this will be achieved through a wide range of approaches, both qualitative and quantitative. Dedicated performance resource has now been secured to the programme to ensure a focus upon reporting new measures related to the changes being introduced. Impact will be measured by an assessment of change over the duration of the pathfinder in the key areas corresponding to our implementation plan. It will also

reflect the experiences of children and families in their interactions with our services and seek the views of both operational and strategic leaders in that journey of service reform.

We will work in close collaboration with the evaluation partner over the coming months and recognise there is a vital need to capture the impact of service transformation to support the potential for sustainable funding solutions.

Oversight of the programme is undertaken by the DfE and is captured through monthly reporting meetings to assess progress against the identified milestones and financial monitoring by analysing spend against the projections within the costed plan. Those meetings provide opportunities to flag progress, potential barriers or emerging programme risks at an early juncture.

The internal governance of the programme is provided by the pathfinder executive group and this forum is independently chaired. It has representation from all key stakeholders at an executive board level and includes Councillor Mrs P A Bradwell OBE as the lead member for Children's Services.

### **Risks and Challenges**

The DfE element of the Pathfinder programme runs until 31 March 2025 and the ambition from central government is that the new reforms can demonstrate the necessary impact and be seen as integral and on-going elements of service delivery and funded accordingly. However, whilst this is clearly the aspiration, there are no financial guarantees provided beyond the funding already received within the scope of the current programme.

Consequently, financial sustainability has been a key consideration within our planning and influenced the decision for recruitment to new posts being undertaken on a fixed term basis. This is intended to minimise any future potential financial risks and enable a clearer picture of future government funding commitments which may emerge as we move forward in the programme.

Whilst we have rightly embraced the opportunities that exist within the Pathfinder, there is also no intention or willingness to progress or trial new areas of practice that could potentially undermine our strengths, expose new risks around complex case work, or create uncertainty in our working relationships with partner agencies.

Within several critical areas, we have held a robust stance in maintaining our current position to ensure long term credibility and stability. This includes the retention of the vital role of the social worker within Section 17 (Child in Need) work and the crucial role that the Independent Chair fulfils within Child Protection Conferences.

## **2. Conclusion**

Lincolnshire Children's Services has a longstanding and highly regarded record of delivering high quality services to children and families which has been externally validated through rigorous inspection. We place a high value upon restorative and relationship-based practice and have an exceptionally strong and mature early help offer which is understood and strongly supported by our partners. The Pathfinder aligns with our values and overarching objectives and presents an opportunity to capture and share learning for the benefit of Lincolnshire and the national children's services sector.

The Pathfinder programme provides Lincolnshire Children’s Services and our partners with a unique responsibility to design and evaluate innovative approaches in how we work with children and families moving forward. The programme is guided by the implementation plan and a milestones document to assess our progress at key intervals.

As we now move into the implementation phase, we are seeking to complete the recruitment of all the identified roles who will support the programme. The impact of the changes we implement will be captured both internally and through the appointed DfE evaluation partner. The assurance, monitoring and oversight of the programme continue to be managed through our established governance structures, and externally through the DfE.

**3. Consultation**

**a) Risks and Impact Analysis**

Not Applicable

**4. Appendices**

These are listed below and attached at the back of the report	
Appendix A	Stable Homes, built on love - Department for Education (2023)

**5. Background Papers**

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Andy Cook, who can be contacted on 07787 887175 or [andy.cook@lincolnshire.gov.uk](mailto:andy.cook@lincolnshire.gov.uk).



Department  
for Education

# **Children's Social Care: Stable Homes, Built on Love**

**Government Consultation Response**

**September 2023**

CP 933





# **Children's Social Care: Stable Homes, Built on Love**

**Government Consultation Response**

**Presented to Parliament  
by the Secretary of State for Education  
by Command of His Majesty**

**September 2023**

CP 933



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## Ministerial Foreword

### David Johnston OBE MP, Minister for Children, Families and Wellbeing

I am honoured to have been appointed Minister for Children, Families and Wellbeing at such an important time for children's social care. This strategy hinges on love and stability, recognising these two fundamentals are what every child – and adult – needs to thrive. Our aim is to create a children's social care system which priorities love and stability for children and families relentlessly.



In February 2023, the Secretary of State for Education, the Rt Hon Gillian Keegan MP, set out the Government's pledges for the future of children's social care. I am determined to build on the work of my predecessor, Claire Coutinho MP, who launched a comprehensive strategy for transforming the experiences and outcomes of children and families who need support from children's social care. Achieving this vision is a shared commitment across the whole of government, but I recognise that there is much to do to achieve it.

*Stable Homes, Built on Love* is the department's bold and ambitious implementation strategy to achieve this necessary shift. It makes a compelling case for change: one I believe will make the necessary difference to children's lives. We have and will continue to make sure our vision and ambitions are supported by those working hard to achieve this change, and by people with personal experience of the care system. That is why, alongside publishing the strategy, we launched a period of consultation, to get immediate feedback on our aims, and to ensure our direction of travel was the right one.

Building upon what we have heard, we have already taken action to deliver change. In July, the department announced the first areas to take part in the Families First for Children Pathfinder and Family Networks Pilots. Together, these programmes will lead the way in designing and testing our ambitious reform programme for family help and children's social care. Applications also opened in July for local authorities to set up Regional Care Co-operatives, as part of our commitment to establish pathfinders and support local areas to provide enough stable and loving homes for children in the right place at the right time.

I would like to express my sincere thanks to the individuals and organisations who took the time to respond so thoughtfully to the consultation. I am particularly grateful for the 108 responses we received to the children and young people's consultation. I am deeply committed to considering these thoughtful, honest, and insightful views as I embark on my role and continue to drive forward reform. I am also grateful to the hundreds of people

who took the time to share their views at a range of meetings and events during the consultation period, including kinship carers, birth parents, social workers, local authority leaders and others who are expert in the care system, whether through their professional role or their own personal experience.

Now is the time for a once in a generation reform for children's social care. We cannot do this alone. We will build on everything we have heard through this consultation and continue to work incredibly closely with our fellow government departments to ensure we are achieving change across all areas of the system.

A handwritten signature in black ink, appearing to read 'David Johnston', written in a cursive style.

**David Johnston OBE MP**

**Minister for Children, Families and Wellbeing**

## Executive Summary

On 2 February 2023, the government published a new vision to transform children's social care: '[Stable Homes, Built on Love: Implementation strategy](#)' ('Built on Love'). This strategy for reform set out proposals in response to recommendations from Josh MacAlister's Independent Review (Care Review) of Children's Social Care (2022), the Child Safeguarding Practice Panel's National Review into Child Protection in England (following the murders of Arthur Labinjo-Hughes and Star Hobson) (2022) and the Competition & Markets Authority (CMA) Children's Social Care Market Study (2022).

The proposals set out in 'Built on Love' are backed by £200 million of additional investment to existing spending over the next 2 years, and organised under 6 'pillars' of reform:

1. Family help provides the right support at the right time so that children can thrive with their families
2. A decisive multi-agency child protection system
3. Unlocking the potential of family networks
4. Putting love, relationships and a stable home at the heart of being a child in care
5. A valued, supported and highly skilled social worker for every child who needs one
6. A system that continuously learns and improves, and makes better use of evidence and data

Alongside the strategy the Department for Education launched a consultation, which was open for 14 weeks and closed on 11 May. The consultation sought views on proposals for:

- support for children and families
- parental representation in child protection
- support for kinship carers, and wider family networks
- reforms to the experience of being in care, including corporate parenting
- support for the workforce
- delivery and system reform

We received 1,043 online responses to the consultation. A breakdown of respondents can be found in Annex A with organisations willing to be named in Annex B.

We particularly wanted to hear directly from children and young people with experience of children's social care, to help make sure we understand what really matters to them. Alongside 'Built on Love' we published a guide to the strategy for children and young people and included 9 questions in the consultation specifically for children and young people under 18, or care leavers up to the age of 25.

During the consultation period we also spoke to around 500 people through in person or virtual consultation events, including children and young people, parents, people with lived experience of children's social care, social work practitioners, other professionals, and sector leaders. Some events were tailored to specific policies, including targeted engagement with local authorities about Regional Care Co-operatives (RCCs). We also ran focus groups, including with care leavers, birth parents, and over 100 kinship carers. We will continue to work closely with these groups on the development of individual policies within the strategy.

We are hugely grateful to the many children, young people, families, carers, practitioners, professionals and organisations who responded to the consultation and spoke to us at events.

In the same period, we separately consulted on:

- A draft Children's Social Care National Framework (National Framework) and indicators for a Children's Social Care Dashboard (Dashboard). The National Framework describes the outcomes that should be achieved so that children and young people can grow up to thrive. The Dashboard is being created to help establish a stronger learning infrastructure, bringing transparency to the system so that the impact of what happens in practice can be understood by leaders and government.
- Proposals to introduce national rules on the engagement of agency social work resource in local authority children's social care.

The [government response to the National Framework and Dashboard consultation has been published separately](#). We are grateful to the many people who engaged with the consultation on agency social work, it is important we take the time to get proposals right and carefully consider the issues raised, we will formally respond to the consultation later this year.

The Public Services Committee have recently conducted a short inquiry into 'Built on Love', publishing a report into their findings on the 25 May. We thank the Committee for assessing the proposals set out in 'Built on Love' and have responded to each of their 17 recommendations through our [response to their Inquiry](#) and have taken their findings into account in this publication too.

We welcomed open and honest views from respondents, including widespread support for the 6 pillars of reform. In their response to 'Built on Love', respondents showed strong support for:

- a focus on love and relationships
- the emphasis on early help and prevention

- a multi-agency approach to safeguarding, supporting and protecting children, young people and families, including more involvement of education professionals
- the commitment to family networks and a family first culture in the strategy, including recognition and support for kinship care
- the ambition of the care experience missions
- recognition of the value of social workers and proposals that strive to improve recruitment, including apprenticeships

Online respondents and others we spoke to during the consultation period also raised some concerns. Largely, the concerns raised were about implementation of the reform programme including the sufficiency of funding, and a need for clarity on how proposed changes would translate into practice. The consultation highlighted polarised views on the timescales for delivery and whether these were too short or too long. Additionally, respondents raised concerns about some specifics, including:

- the challenges in delivering Regional Care Cooperatives
- issues relating to the workforce including recruitment, retention and capacity of practitioners
- greater recognition of the context outside the social care system, such as economic and inflationary pressures on both families and local authorities
- the need for a greater focus on access to health services, particularly mental health support

An independent comprehensive analysis of the formal consultation responses was conducted. More details on the methodology used can be found in Annex A. Evidence from the main consultation and the consultation questions for children, young people and care leavers under 25 have been considered together to inform the government's response and next steps.

## **Purpose of this document**

This document sets out a summary of the consultation findings and the government's response to the findings. It is structured by theme rather than by question to better incorporate views from online responses, written responses, and engagement with children, families, and the sector.

## Where are we now?

Phase one of our reform began in February with the publication of the strategy and the accompanying consultation.

We have started to address urgent issues in the children social care system. We are developing a foster care recruitment and retention programme in partnership with local authorities in the north-east. This is supported by a regional communications campaign and expansion of the Mockingbird programme. We will roll this out across at least 50% of all local areas over the next 18 months. Alongside this we have launched the application process to establish Regional Care Co-operative pathfinders.

We understand how crucial the social worker workforce is to delivering the reforms outlined in 'Stable Homes, Built on Love'. We will be publishing our response to the consultation on the child and family social worker workforce, outlining our plans for national rules on the use of agency social workers. We have commissioned a number of Early Career Framework (ECF) Early Adopter local authorities. We have also appointed the Expert Writing Group.

We recognise that young people leaving care need sufficient funds to meet their needs when they start living independently. We have increased the amount available for the care leavers' allowance from £2,000 to £3,000. This will be accompanied by boosting the care leavers' apprenticeship bursary from £1,000 to £3,000 to give better opportunities for care leavers to start and complete high-quality apprenticeships.

We have made regulations to introduce national standards and Ofsted registration and inspection for supported accommodation for looked after children and care leavers aged 16 and 17. Ofsted started registering providers on 28 April 2023 and registration becomes mandatory from 28 October 2023, before inspections begin in April 2024.

We are committed to setting national direction to achieve better outcomes for children, young people, families and the children's social care system. [We have published our response to the consultation on the Children's Social Care National Framework and Dashboard](#). We are adapting the National Framework based on feedback and will issue it as statutory guidance in December 2023. This will be published alongside feedback we have received on the consultation on revisions to '[Working Together to Safeguard Children](#)'. The response and updated statutory guidance will also be published in 2023.

We have announced that from April 2024, the Supporting Families programme will transfer from the Department for Levelling Up, Housing and Communities (DLUHC) to the Department for Education (DfE). The transfer of Supporting Families to DfE will enable the department to provide a coordinated, whole system of support for children and families, and ensure services are sustainable for local government. This move came on



top of the 2021 Spending Review announcement of a 40% cash terms uplift for Supporting Families, taking total planned investment for 2022 to 2025 to £695 million.

We have heard and continue to hear examples of good practice in children's social care which we will build upon in developing our approach for future reform. In July, we announced the first local areas selected to deliver the Families First for Children pathfinder and the Family Network pilots<sup>1</sup>. Local areas will be able to apply to join the second wave of the pathfinder, which will start in 2024. From the consultation and other feedback, we have refined our approach to the pathfinders for RCCs and whilst our long-term vision remains unchanged, we plan to develop RCCs on a staged basis.

For 'Stable Homes, Built on Love' to be successful and make sure that children's social care works for everyone, we recognise the need to do more for disabled children and children with complex needs.

For children in the most complex situations and who are currently (or at risk of) being deprived of their liberty, we have launched a cross-government task and finish group, jointly with NHS England (NHSE). This is to improve how system partners work together to improve experiences and outcomes for this cohort of children. We are working on an aligned cross-government approach to design, commission and deliver the best possible models of integrated care.

In April, the Child Safeguarding Practice Review Panel published phase 2 of its review of the abuse and neglect suffered by children and young adults in 3 privately-run children's homes operated by Hesley Group, in Doncaster. The abuse and neglect suffered by 108 disabled children and young adults in these children's homes was appalling. We are working at pace across government to consider the Panel's recommendations and engaging with stakeholders. We will respond in due course.

We have heard from sector experts in disability at a joint Children's Social Care and Special Educational Needs and Disability (SEND) roundtable in May 2023. This has informed our policy thinking about the support disabled children and their families need across the full reform programme. We will continue to develop and learn about what works best for these children and families as we reform.

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<sup>1</sup> Dorset, Lincolnshire and Wolverhampton are the first areas announced for the Families First for Children pathfinder. For the Family Networks pilot, Brighton and Hove, Sunderland, Telford and Wrekin, and Gateshead will be the wave 1 local authorities, and Staffordshire, Hammersmith and Fulham, and Hartlepool will join wave 2, starting in spring 2024.

## People with lived experience

We are committed to hearing from and responding to the wishes and feelings of children, young people, parents and families, and a wide range of people with lived experience beyond our consultation as we continue to design policy and deliver our reforms. We know that it is important that the voices of those with care experience and lived experience of care, as well as those working in the sector, are heard throughout the reform period.

We established the National Implementation Board and policy focused reference groups, which include people with lived experience of the children's social care system representing a wide range of experiences. These groups continue to challenge and support delivery of the reform programme. People with lived experience are also members of the National Practice Group, which plays an integral role in supporting the government to set national direction for practice in local authority children's social care.

During our consultation period and as part of our wider engagement, we held sessions with family members including birth parents, kinship carers and adopters. We will continue to grow this engagement throughout the implementation of the reform programme.

Children, young people, parents, families, and other people with lived experience have a vital part to play in our vision to transform children's social care. We want their voices to be at the core of our work as we progress policy development and delivery both at a national and local level. Policy teams, including those working on pathfinders, kinship care, adoption, support for care leavers and those leading on standards for supported education, are all capturing children, young people and people with lived experience's views as part of their policy development and delivery.

We are establishing a Children and Young People's Advisory Board (working title) expected to launch in early 2024, to continue to build on this commitment. We are taking time to establish the board to ensure it has meaning and impact and that we help those who participate in it to develop skills and experiences that will benefit them in the future too. A supplier will support us with this work and we will announce who this will be later in the Autumn. In the interim, we have awarded contracts to Barnardo's and Coram Voice who are working alongside policy officials to facilitate engagement sessions and focus groups with care leavers and experienced young people on a range of policy proposals outlined in the strategy over 12 months to Spring 2024.

We are grateful to sector colleagues who continue to support and challenge us to develop this work and actively demonstrate our commitment to engaging those with lived experience. We are committed to learning from where this engagement is already being done well.

## Funding

In February, we announced £200 million funding alongside the ‘Built on Love’ strategy, which is being used to address urgent issues over this Spending Review period and set the path for longer-term reform. We will test some of the most complex reforms to assess the impact of new measures and learn from our approach to inform future decision making at all levels. In particular, we will be learning through co-design through our Families First for Children and RCC Pathfinder programmes.

This funding is on top of:

- £142 million we will invest by 2024 to 2025 to take forward reforms to unregulated provision in children’s social care
- £160 million we will invest over the next 3 years to deliver our Adoption Strategy
- £259 million over this Spending Review period we are investing to maintain capacity and expand provision in secure and open residential children’s homes
- £230 million over this Spending Review period to support young people leaving care

The 2022 Autumn Statement secured an additional £1.3bn in 2023 and 2024 and £1.9bn in 2024 to 2025 to help local authorities with pressures on their children’s and adult social care budgets. This will be allocated through the Social Care Grant.

The government is committed to investing in key areas for all families, including more targeted support for families who need it. We have already announced over £1billion for programmes to improve early help services, including delivering on Family Hubs and helping families facing multiple-disadvantage through the Supporting Families programme, and Holiday Activities and Food programme. The NHS is investing additional funding in children and young people’s mental health as part of the Long-Term Plan, rising to £900 million in 2023-24. Access has increased in these services by around 35% since 2019/20. This includes through new Mental Health Support Teams in education settings which now cover 3.4m (35%) of pupils in England.

We will reflect on the recommendations set out in the Family Review by the Office of the Children’s Commissioner and publish our response to this review in due course. We will also consider recommendations set out by the Archbishops’ Commission on Families and Households, entitled ‘Love Matters’.

## Collaboration

We recognise that successful delivery of this whole system reform for children’s social care will require alignment with wider reforms for children and families, including SEND, Alternative Provision (AP) and childcare. The [Government response to the final report of](#)

[the Independent Inquiry into Child Sexual Abuse](#) sets out our cross-government commitment to prevent, protect and support victims and survivors of child sexual abuse.

We are responding to the Child Safeguarding Practice Review Panel who published phase 2 of its review of the abuse and neglect suffered by children and young adults in 3 privately-run children's homes operated by Hesley Group, in Doncaster. Many of the failures identified by the Panel are parts of the system that we are already beginning to reform. The events in these homes bring into even sharper focus our reforms in SEND and AP, children's social care and in the NHS Long-Term Plan to improve the lives of disabled children.

We all have a role to play in protecting vulnerable children. Within DfE, we are continuing to make sure that at every level there is sustained and considered join up between children's social care, schools, skills and the SEND and AP system. We have explored strengthening the role of education (colleges, schools and early years settings) in our consultation on Working Together, consulting a wide range of voices across the care, further education and higher education sectors on how best an accreditation scheme for higher and further education providers could be delivered, and expanding our Virtual School Heads programme for children in care and care leavers. From August 2023, we have raised the care leaver apprenticeship bursary from £1,000 to £3,000.

We will continue to work across government departments to co-design and deliver our reforms, for example, through the Families First for Children and Regional Care Cooperatives Pathfinder and the statutory guidance Working Together to Safeguard Children. With NHS England, we are jointly leading work with partners across government and with wider stakeholders to develop, commission and deliver joint children's social care and health support for children in the most complex situations. This includes sustaining the implementation of the Framework for Integrated Care (SECURE STAIRS)<sup>2</sup> in the children and young people secure estate in England. We are supporting the work of NHS England and integrated care boards (ICBs) towards meeting the [Long-Term Plan](#) commitments set out for children and young people with mental health needs, learning disability, autism, and those involved with the justice system. We also continue to work in close partnership with the Home Office with regards to unaccompanied asylum-seeking children.

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<sup>2</sup> This framework aims to support trauma-informed care and formulation-driven, evidence-based, whole-systems approaches to creating change for children in these secure environments and focuses on a 'formulation' approach which considers the child or young person's life experience, rather than concentrating on labels, categories, diagnoses, or settings.

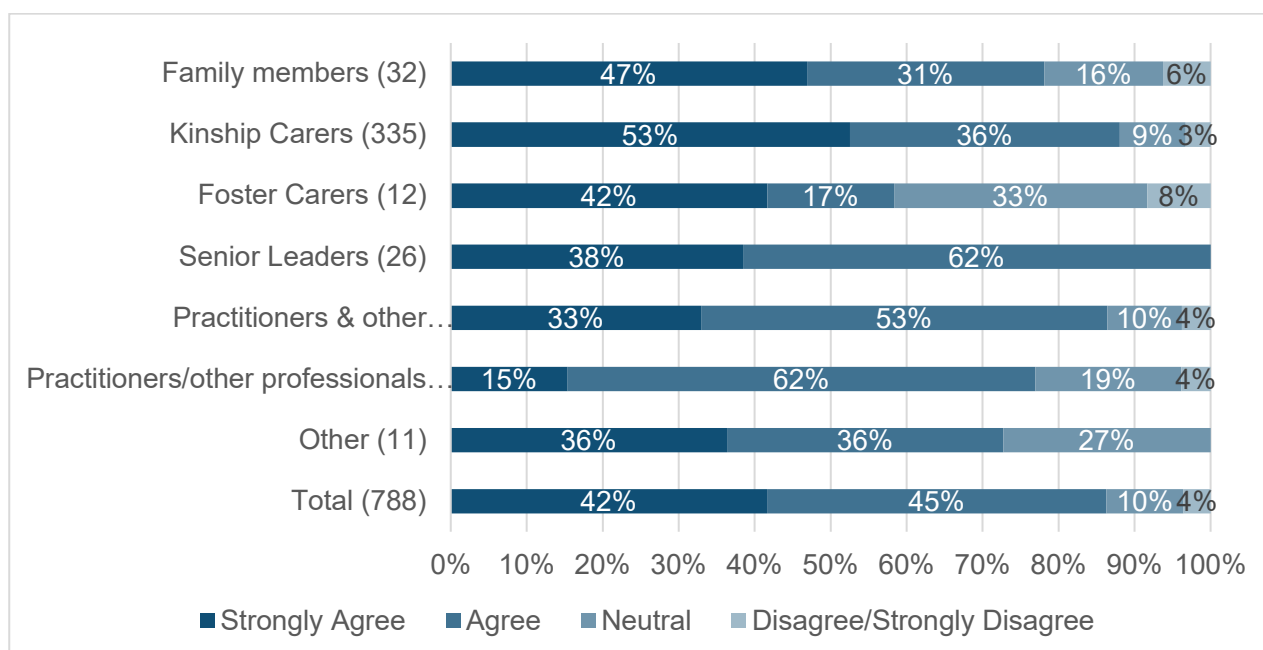
Ministers from across Whitehall will continue to steer and monitor our overall policy direction through multiple cross-government forums, such as the Child Protection Ministerial Group and the Care Leavers Board. We are also pleased to say that since the publication of our strategy, Minister Mercer has been appointed as Cross-Government Care Leaver Lead, supporting DfE to drive the care leaver agenda across government and with our stakeholders in the public and private sectors.

## Our vision, and making reform work for everyone

At the core of the ‘Built on Love’ implementation strategy are 6 pillars of reform. These pillars seek to address urgent issues facing children and families now, laying the foundations for whole system reform and setting national direction for change.

The consultation showed widespread support for the pillars. Approximately 87% (680 out of 788 responses) of respondents agreed (45%) or strongly agreed (42%) that the pillars are the right ones on which to base our reforms for children’s social care. This compares to 4% who disagreed or strongly disagreed, and 10% of respondents who provided a neutral response. Agreement tended to be stronger from respondents who were family members and kinship carers.

**Figure 1: Quantitative analysis of responses to question 7: Overall, to what extent do you agree these 6 pillars are the right ones on which to base our reforms for children’s social care?**



Source: DfE Consultation responses May 2023. Base: 788 respondents<sup>3</sup>

We welcome respondents' support on the emphasis on love and relationships in the strategy, and the prioritisation of a family first approach, including the emphasis on early help, the involvement of family networks in supporting and caring for children, young people and families, and recognition of the value of kinship care. In addition, respondents were encouraged by the focus on multi-agency approaches, including proposals to make education a fourth safeguarding partner, and to celebrate the value of social workers.

“Relationships are the bedrock of the human experience and what enables people to thrive” – a practitioner with lived experience

The respondents that disagreed that the pillars were the right ones raised a need for greater recognition of the context outside the social care system, such as economic and inflationary pressures. Respondents emphasised the importance of adequate, sustained, and consistent funding and consideration of reform in the context of local authority financial deficit. There were also calls for a focus to improve financial support to enable families to continue to care for their children.

“We need funding and better services. We need things like better early intervention with families as the threshold is really high. Yes, we should have good social workers, a culture and system that learns and changes. Love and a stable home should definitely be key. The missing pillar is more funding.” – foster carer

We recognise the financial constraints local areas are facing. Building on investment secured in the 2021 Spending Review, we are investing an additional £200 million into reform for children's social care by 2024 to 2025, including investment for testing innovative new approaches to find more efficient and sustainable models of delivery that can offer better outcomes for children and families. In this first phase of reform until the end of this spending review, we will continue to assess the evidence base for reform, including how to best use funding to achieve ambitious outcomes for children and families.

On a year-by-year basis, children's social care services are funded through the Local Government Finance Settlement. In the current financial year (2023 to 2024), local authorities have up to £59.7 billion core spending power available – an increase of 9.4% in cash terms on 2022 to 2023. The majority of this funding is not ringfenced in recognition that local authorities are best placed to allocate funding according to local

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<sup>3</sup> Excludes 5 respondents that answered 'don't know'. Caution should be taken when comparing proportional responses across categories with a small number of responses (less than 20). This is the case for the 'Foster Carers' and 'Other' categories.

need. As part of the Settlement, the government is providing local authorities with an additional £1.3 billion to be distributed via the social care grant, ringfenced for adults' and children's social care this year, meaning a total social care grant of £3.85 billion.

In a follow up question, over half of respondents (212 out of 363, 58%) suggested important or additional features they felt were required to achieve the ambitions of the pillars. This included more action to address workforce challenges and more detail on working with other sectors and clarity on multi-agency working. Some suggestions mentioned more focus on specific groups (67 out of 212, 32%), particularly children in kinship care and those that care for them, disabled children, and those with complex needs. We are continuing to make sure that this reform focuses on resetting the system and that children's social care works for everyone.

### **Views of children and young people on the vision and 6 pillars of the strategy**

In our [Guide for Children and Young People](#) we translated the 6 pillars into 6 ambitions for children and young people. These were:

Ambition 1: Family help

Ambition 2: Keeping children safe

Ambition 3: Supporting families to help children

Ambition 4: Make care better for children in care and care leavers

Ambition 5: Children have great social workers

Ambition 6: Improving the whole system for children and families

“I think the 6 ambitions listed are very important and valuable and should improve the lives of young people in or entering care. Support for the families is not talked about enough, so I am glad that is included in the 6 ambitions.” – care leaver

In the consultation we asked children and young people what difference they thought our ambitions will make to the lives of children and families. Nearly half (48%) said the ambitions would make a positive difference, 26% felt it was too soon to tell, and 20% said they don't think they will make any difference to the way things are currently. Some children and young people said additional funding was important to the success of these ambitions. Others mentioned additional support for kinship care, decreasing the turnover of social workers, and more training for practitioners.

Throughout our engagement, children and young people were positive about the ambitions and the strategy as a whole. Some key areas where they felt more could be done included supporting kinship care and keeping siblings together wherever possible.

## Support for disabled children

### Since publication, we have:

- consulted on proposed changes to Working Together to Safeguard Children statutory guidance to strengthen the focus on the needs of disabled children and their families
- convened a joint Children’s Social Care and Special Educational Needs and Disability (SEND) roundtable with sector experts on disability in May 2023
- announced the first 3 local areas for the Families First for Children Pathfinder which will incorporate a focus on support for disabled children and their families

### In the next 18 months, we will:

- work closely with the Law Commission as they review legislation relating to disabled children, and once complete, receive their recommendations
- begin a review in autumn 2023 and is expected to take between 15 to 20 months to complete

The ‘Built on Love’ strategy emphasised the need for children’s social care to work for everyone. To inform this, the consultation asked what more can be done to make sure that disabled children and young people can access the right types of help and support. Respondents called for improvements in mainstream educational inclusion, foster and residential care options, family support and access to health services. Suggestions were also made about how to develop the accessibility of support and services available to disabled children and young people.

Around half of the respondents (281 out of 575, 49%) said support or services should be improved and two-fifths of respondents (244 out of 575, 42%) described ways in which support and services could be delivered more effectively. For both themes, respondents emphasised the need for more and better access to support. Suggestions included earlier assessment, lowering thresholds to access support, reducing waiting times and providing better information about entitlements.

“[We want...] families of disabled children to be better supported by government, local authorities and service providers to navigate the children’s social care system. They must have access to the right information about the services that are available, legal entitlements to support and how they go about accessing this support.” – A charity

In 2022 we launched the Short Breaks Innovation Fund, to trial new approaches to short breaks support for families with disabled children, with a particular focus on early intervention. Local authorities selected to receive funding will share £30 million over 3 years to trial targeted short breaks support.



One-quarter of respondents expressed concerns about funding (151 out of 575, 26%). They suggested more funding was needed for:

- services for disabled children and young people, including early intervention
- financial support packages or allowances
- educational provision in mainstream and specialised educational settings
- recruitment and training for specialist staff and foster carers
- some said that funding should be ringfenced specifically for this group

Between 2023 and 2026, the government is investing £27.3 million a year in Support for Families with Disabled Children (SFDC) funding to support low-income families raising seriously ill or disabled children in England, by providing small grants to purchase equipment, goods and activities which would otherwise be inaccessible. This funding is currently administered by our delivery partner, the Family Fund Trust.

A fifth of respondents (105 out of 575, 18%), mostly practitioners, professionals and senior leaders, suggested improving assessment and support of disabled children and young people, by promoting a needs-based approach rather than automatically approaching support for these families through solely a standard safeguarding or risk lens.

“It must be a priority to address the current Working Together to Safeguard Children guidance which channels parents and carers of children with learning disabilities down a child protection pathway even if there are no child protection concerns.” – A charity

We have consulted on proposed changes to Working Together to Safeguard Children statutory guidance, to strengthen the focus on practical, non-stigmatising and specific support for disabled children and their families. This will recognise the additional, and often distinctive, pressures facing the whole family. This is the next step in strengthening support for these children and their families, and future changes will take account of the findings of the Law Commission Review of children’s social care legislation for disabled children, together with emerging evidence from the Families First for Children Pathfinder.

A quarter of respondents (mostly practitioners and professionals) highlighted communication between professionals and practitioners, alongside multi-agency working as a key priority. Respondents highlighted the importance of children’s social care reforms aligning with other programmes and reforms taking place across government. The SEND and Alternative Provision Improvement Plan was published one month after ‘Stable Homes, Built on Love’. We recognise how important it is to achieve consistency across these reform programmes. The department is working across government and with stakeholders to make sure that reforms are coherent, there are better services and consistent support for all children and families.

Within the consultation period we convened a joint Children's Social Care and Special Educational Needs and Disability (SEND) roundtable to hear from sector experts on how we can make our systems, family help and workforce reforms work better for disabled children and their families. The attendees emphasised the importance of a tailored approach for children and families entitled to support from social care services. They highlighted that the implementation of the strategy represents an important opportunity to improve and transform how systems provide support for children who have a disability.

Experts also stressed how important it is to make sure that social care support for disabled children and their families is fully integrated with specialist support from health care and education professionals. We will build on the positive engagement and what we heard at the roundtable and continue to engage with stakeholders to inform our policy thinking on what works to support disabled children and their families across the full reform programme.

## **Safeguarding children with disabilities and complex needs in residential settings**

In April 2023, the Child Safeguarding Practice Review Panel published [Phase 2 of their review into safeguarding children with disabilities and complex needs in residential settings](#). The Panel's report was published after the 'Built on Love' strategy. The review found children suffered appalling abuse and neglect in 3 privately-run children's homes operated by Hesley Group, in Doncaster.

Government is reviewing the recommendations set out by the Panel alongside continuing sector and stakeholder engagement about what action we can take to better help, protect and care for disabled children in England. We are working at pace across government on our response to the Panel's recommendations that we will respond to in due course.

## **Children's rights and equalities**

As part of the implementation strategy, we considered how policy changes may impact children's rights and those who share protected characteristics under the Equality Act 2010. Addressing inequalities, protecting, and promoting children's rights and creating a more just system of social care lies at the heart of our reforms.

We asked in the consultation if respondents had any comments on the potential impact of the proposed changes on equalities. The majority of respondents focused on inequalities in the current system and agreed that it was important that equalities are fully considered within the reform programme for the system to provide equal opportunities and access to support. Other respondents emphasised the need for training for practitioners to improve the awareness and understanding of disability and special educational needs. A few respondents commented that the proposed changes as set out in the strategy would

have a positive impact on those who share protected characteristics by improving the whole system.

We also asked respondents about the impact of the proposed changes on children's rights. Half of respondents to this question (97 out of 184, 53%) confirmed the importance of children's rights in the context of these proposals and felt a child-centred approach was necessary within children's social care. Some reiterated that reform needs to consider equality and inclusion. Around a quarter of respondents (41 out of 184, 22%), predominantly kinship carers, expressed that it was important that policy changes include and consider the voices and rights of children, parents, families and carers.

Some respondents, predominantly practitioners, commented on protected characteristics, particularly with views that care experience should be recognised as a protected characteristic. We have heard that care-experienced people face stigma and discrimination. Our ambition remains to extend corporate parenting responsibilities to other government departments and relevant public bodies, subject to legislation (when parliamentary time allows). We believe this will ensure that policies and services that affect children in care and care leavers better take account of the challenges that they face and provide opportunities for them to thrive.

We are committed to considering the impact that reforms have on individuals and groups with protected characteristics and on children's rights. We will continue to update equalities and children's rights assessments for all proposed policy changes, and we will use the pathfinders to assess the impact of new measures and to inform future decision making.

## Family help: support for children and families

### Since publication, we have:

- agreed the first 3 local areas for Wave 1 of the Families First for Children pathfinder programme (announced in July), which will test the implementation of reforms across 4 policy areas:
  - family help
  - child protection
  - safeguarding partners
  - family networks
- started working closely with each area and their partners to co-design a local system of end-to-end reform that will begin in autumn 2023
- announced that we are transferring the Supporting Families programme from the Department for Levelling Up, Housing and Communities into the Department for Education from April 2024 - the programme's model of stepping beyond single policy agendas to drive local integration and whole family support will be key for the reforms around family help

### In the next 18 months, we will:

- launch Wave 2 of the pathfinder programme in up to 9 more local areas in 2024
- continue to work closely with Pathfinder areas to support ongoing evaluation, which will provide us with the necessary detail and evidence required to inform further implementation - this will test the future system we want all areas to adopt
- work with local authorities outside of Pathfinders to support their transition to our vision for family help – this will include capturing and cascading best practice from all local authorities, and the development of practice guides

A fundamental element in 'Built on Love' is its vision to provide more meaningful and effective early support and subsequently rebalance children's social care away from costly crisis intervention. This focus on early support and prevention will be tested through the Families First for Children pathfinder.

## What is family help?

We are pathfinding a new approach to family help, building on evidence of what works, that brings together current targeted early help and child in need into a single system in local areas.

Targeted early help describes a service provided to children and families who are identified by practitioners to have multiple or complex needs, or whose circumstances might make them more vulnerable. It is a voluntary service that provides support before statutory intervention is needed and takes a casework approach. A lead practitioner coordinates a whole family assessment to better understand the family's needs and identify the most appropriate support for the child, young person or family. Child in need refers to the statutory support provided under section 17 of the Children Act 1989.

## A single family help service

Respondents were largely supportive of the proposal of a single family help service. Half the respondents to this question (382 out of 747, 51%) were fully supportive of the proposal for a single family help service (51%) and a further third were somewhat supportive (242 out of 747, 32%). Around one-tenth (9%) of respondents were 'neutral' and 7% selected 'somewhat oppose' or 'strongly oppose'.

"I really do hope that this is open to helping more people at an early stage and a step towards helping those in need so that something that maybe small initially doesn't turn into a huge crisis." – Kinship carer

In a follow up qualitative question, one-third of respondents commented on the benefits of family help (146 out of 416, 35%). This included increasing continuity of support for children, young people and families, which would reduce gaps in support and repetitive assessments. Respondents spoke about family help reducing the stigma of family support and encouraging families to engage with services. Some people commented on the value of multi-disciplinary teams enabling support to be effective and joined up.

"This must be more robust; too often 'Early Help' provision is patchy, with no accountability for which agency is providing it." – a multi-agency professional

Around a quarter of respondents to this question highlighted concerns about a single family help service (114 out of 416, 27%). A common concern amongst social workers and professionals was that this would blur the threshold between early help and support for Child in Need Plans, as well as blurring lines between social work practitioner roles. This led to some concerns that help earlier would be more stigmatising and it would reduce the level of support for children in need from qualified practitioners. Linked to this a few respondents asked for more detail about how the service would work in practice, including risk-holding parameters and clarity around the roles of family help workers and social workers.

Colleagues in the charity sector challenged having national eligibility criteria for family help services, and allowing some local discretion was felt to be important. We welcome the responses regarding local discretion. We will use Pathfinders to test how we can effectively set clearer guidance at a national level on the children and families that should be supported by Family Help. Local authorities will have some additional flexibility to determine if that is an appropriate course of action and will of course need to ensure they are prioritising the welfare and safety of children.

## **Delivery of a single family help service**

Over half of respondents (229 out of 416, 55%) identified important implementation issues for a single family help service. These include features for effective delivery, clarity on workforce issues and multi-agency working. Respondents told us there needs to be sufficient funding and value placed in considering the evidence base and co-production.

Pathfinders have been backed by an additional £45 million investment. They will test how to effectively implement family help in a way that reduces the unnecessary and bureaucratic handovers between services and improves consistency and quality of support for children. In co-design, we will work with local areas to make sure they have arrangements in place to appoint lead practitioners with strong oversight, including social workers, with the right capacity and capability, based on the specific needs of the child.

The family help system will work alongside and in coordination with a wider partnership of support, including universal services, non-state support (such as the voluntary and community sector and faith groups) and other support delivered through a Family Hub network, as part of a local areas' wider support for families. Examples of the support available is wide ranging, but might include for example, support with domestic abuse, mental health support, relationship support, school attendance support. These wider services will be available to children and families whether or not they are receiving support from within the family help system.

Respondents to these questions reflected on additional delivery features they felt were important for the effective delivery of family help in local areas. This included staff being able to develop effective relationships, engage with children, families and wider family networks and seeking input from children and families in the service. Respondents also spoke about the accessibility of support and services, including therapeutic and trauma-informed support, and basing the service in a local community. They also spoke about the importance of support being available to the children, young people, families and carers that need it, including kinship carers particularly mentioning financial support here. We welcome these responses, and they will be considered in the development of the family help model to be tested in Pathfinders.

Through our engagement events, we heard examples of good practice in children's social care already taking place. People showed welcome interest in the progress of the Family First for Children pathfinder and a request for transparency about the outcomes and evaluation of this. We are commissioning an independent evaluation of the Families First

for Children pathfinder. Evaluation reports detailing findings and policy recommendations will be published throughout the evaluation.

## Lead practitioners

We asked respondents what they thought were the top 3 features of existing early help that make it a supportive service for families.

The most selected features for this question were:

- people with the right knowledge and skills to help (selected by 382 respondents)
- a strong relationship with a key worker (370)
- designed with the input of children and families (363)

Other features that were seen as important included services being based in local communities, and being able to access the right type of support was also selected by a high number of respondents as their first choice (110 and 76 respectively).

We want to bring the ethos of targeted early help into child in need and this includes greater flexibility around who can be a lead practitioner – based on the principle of the right person at the right time to build a relationship with the family, who also has the right skills, knowledge, experience and oversight. Alongside developing the family help model for Pathfinders, we have used Working Together 2023 to consult on enabling a broader range of practitioners to carry out direct work with children and their families where support is provided under section 17 of the Children Act 1989 and with appropriate safeguards in place to identify risks of harm.

### Views of children and young people on family help

Throughout our engagement, children and young people told us that their relationships with practitioners can provide safety and assurance, particularly in the absence of a family network. Positive, consistent relationships with practitioners are vital and Early Help practitioners were often a consistent presence in young people's lives and this mattered significantly to them.

In the consultation we asked children and young people which trusted adult they would recommend to a friend, if their friend told them they were having serious difficulties with their family at home and they wanted help. We received a total of 57 responses.

Almost half of the young people who answered (47%) said they would trust a teacher or a member of their school staff because they are independent of the family. Family and friends were also suggested as a trusted adult. Just under a third of respondents named another professional, these roles included a doctor, a youth worker and a social worker. Just under a fifth of respondents named an external charity, such as Childline, Barnardo's or the NSPCC. A few respondents mentioned foster carers.

## Working with families

We heard how people would like clarity on how the Supporting Families programme and Family Hubs will be complementary to one another and how these feed into wider plans for family networks. We welcome these comments and can confirm we are working across government to have more systematic and strategic join up in support for families, including gathering learning from existing programmes such as Strengthening Families, Protecting Children, Supporting Families, and from initial Family Hubs delivery. We have recently announced the Supporting Families programme will be moving into the Department for Education to bring together the end-to-end system of support – from Family Hubs through to Children’s Social Care – enabling services to be designed around the needs of children and families, in the communities where they are needed.

Government has invested heavily in place-based planning and delivery of joined up family services and is committed to implementing the Family Hub model. We will use the pathfinder programme to explore and test how the family help system and the local family hub network – where they are established or being established – can be fully integrated as part of the wider support and protection offer for families.

Charity sector respondents highlighted the importance of tailoring support for children with SEND. This includes helping families to navigate the services available to them. Respondents told us of the need to closely align the reform programmes across SEND and children’s social care to help local authorities navigate the changes in the round. Parents helped us to better understand the barriers experienced by the families of children with disabilities and the challenges they face in accessing the right support in a timely manner and whether these could be improved in a family help system.

Central to the Families First for Children pathfinder programme is developing a supportive, non-judgemental service that is tailored to meet the needs of children and families. This includes children with disabilities, recognising that these families may require support with accessing the right help. We will work closely with pathfinder areas to develop and test different approaches to supporting children with disabilities, including exploring more flexible and tailored approaches to assessment for this cohort.

We will put children and family voice at the heart of family help and have therefore tried to use best practice from across the country to inform the design of family help. We will work closely with Pathfinder areas to have the right systems in place to do this.



## Child protection

### Since publication, we have:

- run a consultation on Working Together to Safeguard Children statutory guidance that includes new national multi-agency child protection standards and principles for effective working with parents and carers
- commissioned an evaluation of the multi-agency arrangements in local areas such as multi-agency safeguarding hubs (MASH) that triage referrals, which will start in autumn 2023
- published multi-agency practice principles to support responses to child exploitation and extra familial harm, through the Tackling Child Exploitation Support Programme
- recently invested an additional £10m to test new initiatives to reduce family court delays in public law cases

### In the next 18 months, we will:

- use learning from the Risk Outside the Home report (due in Autumn 2023), to inform expectations for effective multi-agency responses to extra-familial harm and exploitation in the wave 2 pathfinder areas and more widely
- work closely with the Families First for Children Pathfinder areas to determine how to implement effective multi-agency child protection teams, embed the role of the lead child protection practitioner and implement effective parental representation in child protection
- support all agencies, organisations and individuals to play their full role in helping, supporting and protecting children through annual updates to Working Together to Safeguard Children statutory guidance

The Care Review and National Panel Review were clear that we need a decisive and effective child protection system that quickly identifies the risk of actual or likely significant harm and takes immediate action. In 'Built on Love', we explained that achieving this means:

- implementing better multi-agency working in child protection
- ensuring that the practitioners with the right skills and expertise across agencies work directly with families in child protection
- equipping the system to respond to the complexity of the harms all children face, whether from inside or outside their homes

- supporting parents to understand what is happening and engage with services when there are child protection concerns
- being clear about how the change that is required gives parents the best opportunity to keep their children safe

To build evidence of effective approaches to parental representation to test in the pathfinder, we asked whether respondents had experience of parental representation during child protection processes (either providing it or receiving it).

Only 3% of respondents to this question said they had been involved in a child protection process and had received a form of parental representation (13 out of 375). This compared to 12% who said they were a parent that had been involved in child protection but had not been offered parental representation (45 out of 375). Some respondents (15%) said they had provided or received some advocacy, predominately with family members acting as advocates (58 out of 375).

One third of the respondents to this question (31%) said they or their organisation had provided a form of parental representation and one fifth (20%) said they or their organisation did not provide this (116 and 76 respectively).

In a follow up question, some respondents provided further detail about their experience of parental representation. Two-fifths of respondents to this question were positive about advocacy in supporting parents and carers, helping them understand process and decisions, empowering them and ensuring they are heard during the child protection process (75 out of 185, 40%). They spoke about advocacy provided by family members, representative organisations, local authorities and as part of parent and carer forum and peer-to-peer support. Other benefits of advocacy that were highlighted included reducing the adversarial nature of the process and providing those with learning needs with appropriate support.

“I have used an advocate in the form of an alternate family member which has worked well” - an adult respondent

A quarter of respondents described their own experience and some of the issues for parental representation describing a lack of support and limited assistance from professionals (51 out of 185, 27%).

“I was offered no support whatsoever my overall experience with it was soul destroying and made me feel like I was left with nothing and no one to turn to without being on a [child protection] “plan” and having social services involved felt like I was constantly being watched and judged it was not nice as I had given up my whole life so my siblings were not put into care.” - Kinship carer

Social workers and practitioners who responded highlighted barriers in the child protection processes such as language, parents feeling intimidated by the number of

professionals present in meetings, and limited time available for parents before conferences to reflect and access support.

“I provided support for a parent with diagnosed learning difficulties to a child protection conference. The biggest barrier to her engagement was the language being used by professionals, when I asked them to explain what they meant they looked at me as if I was being awkward, as if I should know what they meant. They really didn’t realise that they were not communicating in a way that was suitable for the parent”- Qualified youth & community development worker

We agree that there is not a consistent approach to parental representation in child protection and we agree with the respondents who mentioned the importance of having trusted practitioners to provide information and support to parents and carers during child protection processes. We also note the experiences of wider family members and others who report a lack of information, support and advocacy, when taking on the care of children where a decision is taken, through child protection planning, that a child cannot safely remain at home.

We will use the responses to inform what models and approaches to parental representation will be tested in the Families First for Children Pathfinder. Throughout implementation, we will engage with local areas, parents, families and multi-agency practitioners to understand their experiences of parental representation and what works to improve experiences and outcomes in child protection. We will contact those respondents who want to share more detailed information about the services they have received or provided so we can understand what good looks like.

Alongside Pathfinders, we want all areas to improve the way parents and wider family networks receive help and support, including in child protection. We have consulted on new principles for working with parents and carers as part of the update to Working Together. The principles are focused on build positive, trusting and co-operative relationships, using language that is clear and respectful, enabling parents and carers to be part of decision-making and involving parents, families and communities in designing the services that they use.

## **Views of children and young people on child protection**

“It needs to be a child-centred approach. Social workers, police, NHS, youth workers all need to be trained on taking children seriously and acting on concerns and following the process through in a supportive, understandable way for the child, and properly listening to what the child needs and how they can be supported”- child/young person

We spoke to children and young people more generally about child protection. They spoke about keeping children with their parents and families where it is safe to do so. Those that we spoke to were supportive of taking a whole family approach and effective working across services and agencies.

Children and young people also felt there should be greater accountability and better retention in the social work workforce for this approach to be successful.

In our wider consultation engagement, people emphasised the need for a relational approach to child protection work and prioritising relationships with whole families. We heard positive views about multi-agency working which was seen as one of the most important factors for creating a better child protection system. People also felt that knowledge and experience are vital to delivering effective child protection practice.

We agree there needs to be expertise and experience in front-line practice to work directly with children and families and make crucial child protection decisions. This is why we will use the Pathfinders to test a new Lead Child Protection Practitioner role, working alongside family help practitioners and within the new multi-agency child protection teams.

We have heard mixed views on this new role. Local authority leaders said it could be difficult to recruit to and they felt child protection knowledge, skills and expertise were necessary for all social workers working with families across the system of help, support and protection so harm can be identified early, and decisive action taken. We agree with the importance of child protection expertise across the system. We will test the specific functions and requirements of the role across the system through the Families First for Children Pathfinder programme, to answer key questions about how this could work best on the ground.

## Support for kinship carers and wider family networks

### Since publication, we have:

- announced local areas that will be taking part in the Families First for Children pathfinder and Family Networks pilot - these programmes will be testing how Family Network Support Packages can help family networks overcome financial and practical barriers in supporting children to live with their birth parents
- extended legal aid entitlements to prospective guardians making applications for Special Guardianship Orders (SGO) in private family law proceedings from 1st May 2023
- strengthened guidance on engaging Family Networks and use of Family Group Conferences through updates to Working Together

### In the next 18 months, we will:

- publish a national kinship care strategy by the end of 2023
- launch a national kinship training, information and advice service by Spring 2024, backed by the £9 million investment announced in 'Built on Love'
- set out next steps on extending additional workplace entitlements for kinship carers with a special guardianship order (SGO) or child arrangement order (CAO), as well as the case for introducing a financial allowance for kinship carers with SGOs and CAOs in every local authority

'Built on Love' recognises that family networks can play an invaluable role in supporting families and enabling children to live safely with their parents or extended family. Pillar 3 of the strategy focused on unlocking the potential of family networks by creating a "family first culture" by prioritising family-led solutions.

### Family First Culture

We asked respondents how they thought we could make a success of embedding a 'family first' culture. Over a third of the respondents identified aspects of social worker practice that they thought were important to creating this culture (232 out of 597, 39%). This included the use of Family Group Conferences (FGC), engaging and listening to families, and involving wider family networks as early as possible. We agree that these are significant factors and welcome this confirmation of the priorities in 'Built on Love'.

We have strengthened guidance on family network engagement and FGCs in statutory guidance - Working Together to Safeguard Children, to enable more consistency across local authorities in this area and encourage earlier engagement with family networks.

Just under a third of respondents described the importance of support for families and kinship carers (189 out of 597, 32%). A main area identified was the equity needed between kinship and foster carers particularly financial support and long-term support after a child or young person goes to live with kinship carers.

“Levelling up the benefits and advice given to foster care [to] those in kinship care.” -  
Kinship carer

We recognise that kinship carers often need to manage complex family dynamics. It was identified that better support for kinship carers and the children they care for is important to stop further family breakdowns.

“I do think that to help family to step in more, it may be helpful for them to know what support can be put in place for them to give the child the best outcome, offering training to family members so that they have a better understanding.” -  
Kinship carer

We recognise the importance of support for children and young people in kinship care and for kinship carers. We committed to introducing Family Network Support Packages through the Family First for Children Pathfinder and the Family Networks Pilot. These Packages will include practical and financial support to enable extended family networks to provide additional and substantial care for children when it is in their best interests and prevent them from entering the care system unnecessarily. This can include supporting children to live with parents with family support, where it is safe to do so.

Some respondents commented on the importance of training and support for social workers in enabling them to put families first, including relationship-based practice and understanding family networks. In addition, a few respondents mentioned that a family first approach was already being delivered in some local areas and commented that it was important to make this more consistent nationally.

“There is a negative attitude towards kinship which is happening within areas of education, health, and society. Their lack of vision and behaviour, their attitudes and preferences sadly reflect the negative response to a kinship family. People and services need to be educated to help them understand that kinship relationship should be embraced and seen as a victory not another cause for embarrassment!” – Kinship carer

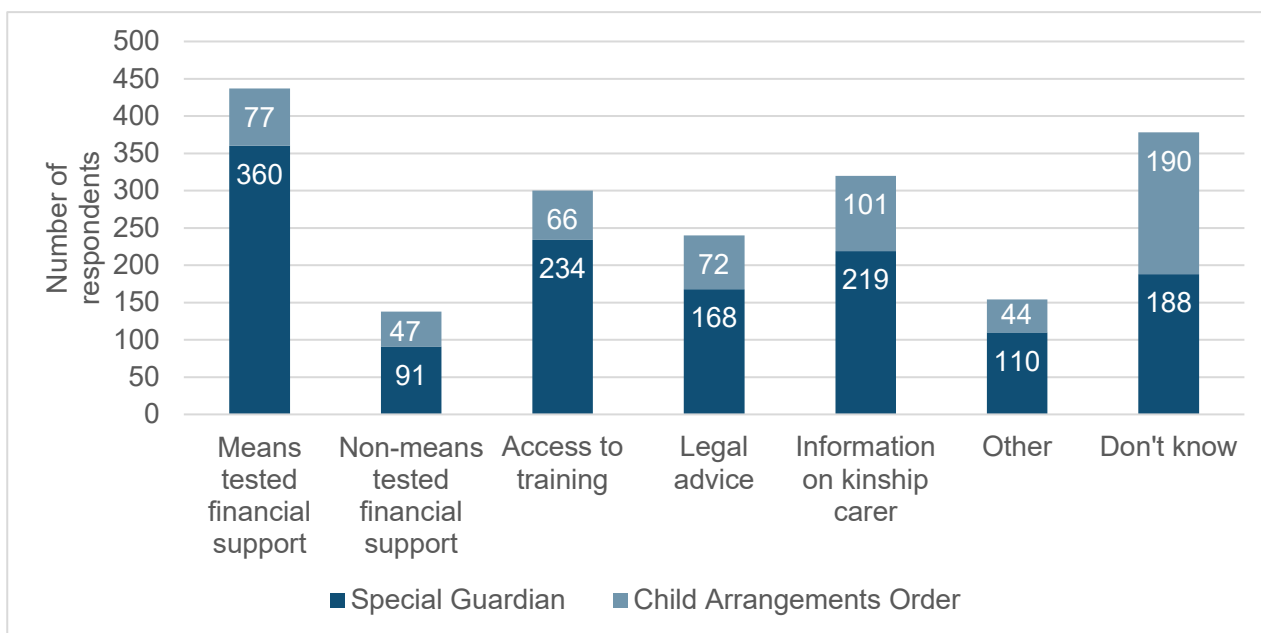
We are due to publish a Kinship Care Strategy by the end of 2023 which will set out our vision for kinship care. We see this as a pivotal moment for kinship care and will provide more detail on how national and local government can promote and support kinship care more effectively. In the revised Children’s Social Care National Framework, we will strengthen references and clarify expectations on the importance of engaging with family networks.

## Support for Kinship Carers

To get a better understanding of the current support being offered to kinship carers, the consultation asked respondents what support their local authority provides to Special Guardians or to a non-parental party with a Child Arrangements Order. The most common support identified by respondents was means tested financial support, which was most commonly offered more to carers with a Special Guardianship Order (SGOs) than carers with a Child Arrangements Orders (CAOs). Non-means tested support was reported by much fewer respondents. Other forms of non-financial support reported by a significant number of respondents included information for kinship carers, access to training and legal advice.

Over a quarter of respondents who provided further detail mentioned that their local authority provided no support. This prompted concerns that kinship carers are left to navigate the process of becoming a kinship carer, and provide a loving stable home, without help from their local authority.

**Figure 2: Quantitative analysis of responses to question 16: What support does your local authority provide to Special Guardians or to a non-parental party with a Child Arrangements Order?**



Source: DfE Consultation responses May 2023 Base: 655 respondents

We recognise that information, advice and support for kinship carers varies significantly across the country, this is why we have made a commitment to invest up to £9 million during this Spending Review period, which will establish a national training and support offer that all kinship carers can access if they wish to, regardless of where they live, as well as exploring the case for mandating a financial allowance for kinship carers with SGOs and CAOs in every local authority.

The consultation asked respondents for their views on what would be the most helpful forms of support that could be provided to a family network, in order to enable them to step in to provide care for their kin. Three-quarters of respondents to this question (471 out of 631, 75%) told us support for family members and access to professionals, housing support, and therapeutic support which could help behaviour management and support a child or young person's mental health would be supportive for a family network.

A key theme across this question, and the consultation as a whole, was financial support for kinship carers. Many of the kinship carers who responded commented on the differences between the reduced financial support given to kinship carers compared to the financial support given to foster carers, which made some kinship carers feel less valued. They call for financial support for kinship care to mirror that for foster care.

“We feel it is important that kinship families are given the same attention and support as foster and adoptive families as we are doing the same job as them, just because we may be family we are still giving up full time employment to bring the best, safe outcomes for our children who just happen to be family.” – Kinship carer

We have committed to explore the case for introducing a financial allowance for kinship carers with SGOs and CAOs in every local authority. We will provide an update on this in the Kinship Strategy, due to be published at the end of 2023.

A quarter of respondents also emphasised the importance of engagement and mediation methods for family networks (156 out of 641, 24%). Respondents told us family network meetings and/or Family Group Conferencing could support open and honest communication around the needs of the child. Respondents also told us consultation with family members would help, as would mediation and facilitation. Respondents also said that sharing information and earlier involvement or intervention would help.

### **Views of children and young people on wider family networks**

Through our engagement, young people told us that they felt wider family networks were important. Young people want to feel a part of a family, but their definition of family is broader and can include distant relatives, friends (often one of their most important relationships), close siblings, mentors, emergency contacts etc. They felt professionals should work directly with children to support them with building these family networks during and beyond their time in care.

Young people were particularly concerned about sibling separation, and the maintenance of these relationship being prioritised. They felt that far too often siblings are separated with little/no explanation to the children as to why this is happening. A recurring theme from those we engaged was that sibling separation should be a last resort and if it has to happen, the process should be more transparent and include a real social worker focus on preserving the important relationships between siblings.



During the consultation period we engaged more than 100 kinship carers directly. To build on this, the department has established a new Kinship Carer Reference Group to inform the development of the kinship strategy. We have also spoken with a range of charities, social workers, academics and other professionals to take their view on the proposed reforms.

Our proposed changes for family networks and kinship care have received a predominantly positive response. The kinship carers we engaged were optimistic about the changes and acknowledged the progress that has been made since the Care Review. However, similar to the response to the consultation, there was a shared agreement that kinship carers need greater support from children's social care professionals practically, financially and emotionally, ideally aligning with the support foster carers currently receive. We also heard that this support needs to be consistent across the country.

## Definition of kinship care

'Built on Love' included a working definition of kinship care and we committed to consulting on this definition so that it reflects the voices of people with lived experience of kinship care.

"A legal definition would enable carers to ask for appropriate aid and services" – Kinship carer

Most respondents were fully supportive or somewhat supportive of the working definition of kinship care. Just under three-fifths of respondents (406 out of 716, 57%) were fully supportive of the definition and just over a quarter (205 out of 716, 29%) were somewhat supportive. One-tenth of respondents selected neutral and 5% were somewhat opposed or strongly opposed to the definition (72 and 33 respectively).

Respondents told us that the definition should have further input from children and their families. Some respondents also felt that a clearer definition was needed and further guidance for how this definition would work in practice and how it would relate to access to support. We agree with this, and have engaged birth parents, kinship carers and kinship foster carers as well as children and young people in the consultation process and will continue to do so. We are now considering the working definition in light of the important feedback we received via the consultation and from the Kinship Carer Reference Group.

A finalised definition that takes into account this feedback will be published in the kinship strategy. Further detail on the establishment and use of this definition will be provided alongside this. We see this as a pivotal moment for kinship care and will be an opportunity to make real and lasting change. The strategy will be informed using this consultation and further engagement to reflect the voices of kinship carers.

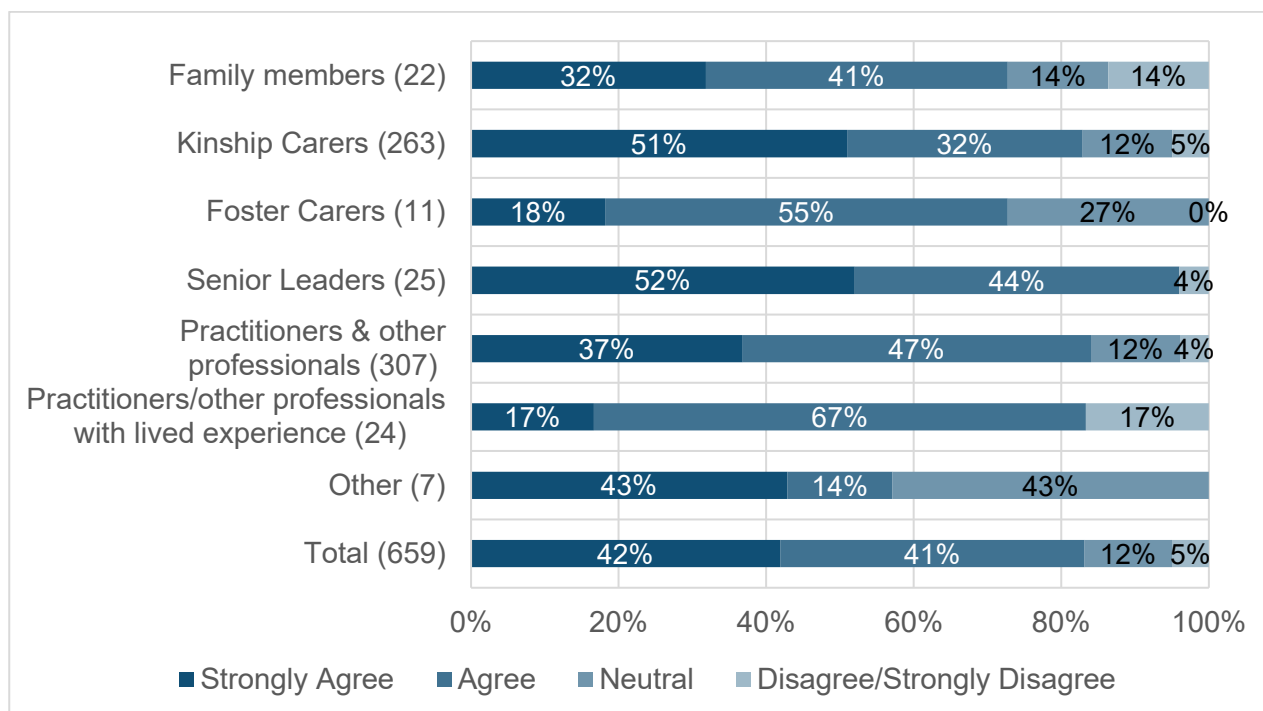
# Transforming the experience of being a child in care or care leaver

## Six key missions

‘Built on Love’ was clear on the importance of providing children in care with stable, loving homes close to their communities. To achieve this, we must prioritise loving and safe relationships for children alongside being world-class corporate parents. We must also be ambitious for our children in care and care leavers. We set out how we will track our progress through six key missions to transform experiences of care.

There was broad support in the consultation for these missions. 83% (548 out of 659) of respondents agreed (41%) or strongly agreed (42%) that the missions are the right ones to address the challenges in the system. Just over one-tenth (12%) of respondents provided a neutral response (‘neither agree nor disagree’) and only 5% disagreed or strongly disagreed.

**Figure 3: Quantitative analysis of responses to question 18: Overall, to what extent do you agree that the 6 key missions are the right ones to address the challenges in the system?**



Source: DfE Consultation responses May 2023. Base: 659 respondents<sup>45</sup>.

<sup>4</sup> Excludes 12 respondents who answered, “Don’t Know”.

<sup>5</sup> Caution should be taken when comparing proportional responses across categories with a small number of responses (less than 20). This is the case for the ‘Foster Carers’ and ‘Other’ categories.

In a follow-up question, respondents were able to provide further detail to their answer. Some respondents who were supportive of the missions also suggested further adaptations (111 out of 263, 42%). These included improving the recruitment and retention of foster carers, children’s home staff and social workers. Respondents also mentioned support for relationships with birth families, including reunification. We are working with Foundations, What Works Centre for Children and Families. We have asked Foundations to scope the potential for building the evidence base around successful reunification and local authority practice in this area.

“The weakening of relationships with birth families is one factor why care leavers are more likely to be unemployed, homeless, ill etc.” – Family member

One fifth of the respondents (59 out of 263, 22%) to this question supported the missions but also emphasised the need for sufficient and consistent financial commitments to underpin implementation. Funding was mentioned particularly in relation to recruiting social workers, financial support for carers, developing high-quality placements and supporting staff training. Some respondents (47 out of 263, 18%) felt more detail was needed on implementation of the missions, particularly in regard to measurements of success and how the changes will look in practice. The proposed timelines for implementation of the missions were also mentioned, and respondents’ views were polarised. Some said that action is needed before 2027, while others saw that target as unrealistic.

“Strongly agree they are the right ones however they will only be effective if followed up by the resources and actions to enable them to happen.” - Senior Leader

Outcomes for care leavers are significantly poorer than those of their peers. Our missions and ambitions set out in ‘Built on Love’, aim to improve outcomes across a range of areas including education, training and employment, housing, mental health and relationships. The Department for Education is providing over £230 million over this spending review to support young people leaving care with housing, access to education, employment and training, and to help them develop social connections and networks to avoid loneliness and isolation.

While local authorities will remain responsible for fulfilling their legal duties towards Looked After Children and care leavers (as set out in the Children Act 1989), we believe other government departments and relevant public bodies can also play an important role in improving their experiences and outcomes. Our ambition is to extend corporate parenting responsibilities to other government departments and relevant public bodies. We believe this will ensure that policies and services that affect children in care and care leavers better take account of the challenges that they face and provide opportunities for them to thrive. This ambition is supported through the Care Leaver Inter Ministerial Board, chaired by Secretaries of State for DLUHC and DfE, and with Ministerial representation from all other relevant government departments. Minister Mercer has

been appointed as the Cross-Government Care Leaver Lead. In this role, he is supporting DfE to drive the care leaver agenda across government, and with stakeholders in the public and private sectors.

Respondents also emphasised the importance of improving health services for children in care and care leavers, particularly mental health and trauma support. Their suggestions included easier access to health services, prioritisation on waiting lists, better joined up working between health services and local authorities, and free prescriptions for care leavers. Mental health and trauma support was also mentioned as a key skill for practitioners and professionals working with children and families, particularly children and young people who have experience of the care system.

DfE is working closely with DHSC to update the statutory guidance, 'Promoting the health and wellbeing of looked-after children', so it sets out clear expectations of support for the physical and mental health and wellbeing of children in care and care leavers. This guidance applies widely to the public bodies and practitioners that have a role in this area, including local authorities, NHS England and Integrated Care Boards. We will extend the guidance to cover care leavers up to age 25, and we will explore how it can support access to health services, treatment, and support.

We will also incorporate findings from recent research into the emotional wellbeing needs of care leavers, and we will increase access and take up of training by all practitioners and professionals working with children in care and care leavers to help them spot the signs and respond when a child or young person needs mental health support. These actions will help consistent provision across England that meets the needs and addresses the particular barriers experienced by children in care and care leavers.

During our consultation period and as part of our wider engagement, we have heard from care experienced people. We are continuing to work with Barnardo's and Coram Voice who are facilitating a range of focussed policy sessions with care leavers and care experienced people. We are establishing a Children and Young People's Advisory Board expected to launch in early 2024, to include the views of children and young people in policy development and delivery.

## Views of children and young people on care experiences

“Care and love is the most important thing...young people need much more than [a spare room] for it to be a successful home” – Child/young person

In the consultation we asked children and young people whether they thought missions for children in care and care leavers are the right things to focus on. Over three-quarters selected ‘yes’ (76%), and just under a quarter selected ‘no’ (24%).

Those that provided detail mentioned that kinship and special guardianship carers should be recognised for the support they give children and young people. Other suggestions included more focus on mental health and trauma informed support, more support for carers, and freeing up social workers’ time so they can spend it with children and families and more training for professionals.

*“Care experienced people are humans too!”- Child/young person*

During the consultation, children and young people spoke to us about needing to change the perceptions of social care. They were frustrated that unfair stereotypes around care experience still exist. They explained that terminology and labelling needs to change, and said that media portrayals perpetuate negative stereotypes and assumptions about low aspirations and intelligence. They felt that the government should do all it can to remove any negative stigma attached to either being in care or being a care experienced young person.

“It shouldn’t be surprising when care experienced people achieve!” – Child/young person

## Strong and loving relationships

### Since publication, we have:

- launched the bidding round for Local Authorities to apply for grant funding to deliver family finding, befriending and mentoring programmes for children in care and care leavers in their locality
- started working with a further 27 local authorities to deliver the Staying Close Programme to enhance the support package for young people leaving care from children's homes and other forms of residential care

### In the next 18 months, we will:

- continue to explore how we can best develop and enhance the currently funded programmes of Staying Close, Staying Put and the work to end rough sleeping to improve the lives of care leavers

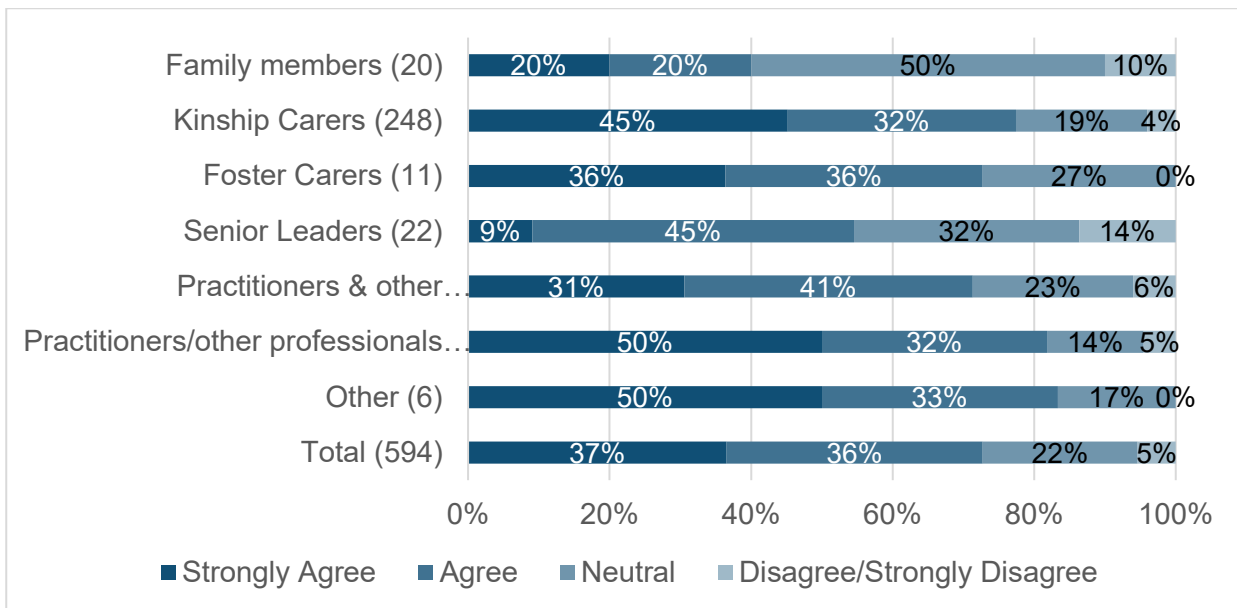
Our first mission is for children in care and care leavers to have and maintain loving relationships with people who are important to them. This includes our aspiration that by 2027, every care-experienced child and young person will feel that they have strong, loving relationships in place. DfE is providing funding to significantly increase the number of local authorities with family finding, befriending and mentoring programme. These programmes will help children in care and care leavers to identify and connect with the important people in their lives and create safe, stable, loving relationships.<sup>6</sup>

As part of this mission we consulted on levels of interest in a lifelong guardianship order, as a way for care experienced people to legally formalise a lifelong bond with someone they care about. Respondents to this question were largely in support of lifelong legal bonds with over two-thirds either agreeing (215 out of 524, 36%) or strongly agreeing (217 out of 524, 37%) that a care-experienced person would want to be able to form such a bond. Just over one-fifth (130 out of 524, 22%) of respondents provided a neutral response and 5% disagreed or strongly disagreed (32 out of 524). Respondents also mentioned support for relationships with birth families.

**Figure 4: Quantitative analysis of responses to question 19: To what extent do you agree or disagree that a care experienced person would want to be able to form a lifelong legal bond with another person?**

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<sup>6</sup> [Family finding, befriending and mentoring programmes: application guide for local authorities - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/612212/family-finding-befriending-and-mentoring-programmes-application-guide-for-local-authorities.pdf)



Source: DfE Consultation responses May 2023. Base: 594 respondents<sup>78</sup>.

We asked respondents what they felt the benefits and disadvantages would be for a lifelong legal bond. Almost two-thirds of respondents to this question identified positive impacts (278 out of 430, 65%). Most of these respondents felt it would give people with care experience a feeling of security, stability and belonging through adulthood, like that felt by those without care experience. A few respondents suggested the legal bond may be able to provide legal rights such as next of kin, inheritance and property rights and mortgage guarantor.

“It’s everything. When you’re living with a family who aren’t biologically your own, you’re always worried they might leave, or you don’t belong, and it brings up a lot of feelings and concerns...making this an option for care experienced people is SO important. Speaking from experience. This is my situation, and it would be so, so reassuring and really improve my emotional well-being and quality of life” – A care experienced person

Over two-fifths of respondents identified potential disadvantages of the lifelong bond model (191 out of 430, 44%). The most prominent concern was about the risk of the relationship breaking down in the future and the impact this might have on the person with care experience. Respondents also raised the possible impact on foster carers who care for multiple young people, including financial impacts or increased responsibilities. These concerns lead to suggestions that this type of legal bond should be optional as it

<sup>7</sup> Excludes 56 respondents that answered ‘don’t know’.

<sup>8</sup> Caution should be taken when comparing proportional responses across categories with a small number of responses (less than 20). This is the case for the ‘foster carers’ and ‘other’ categories.

would not be suitable or desired by all care experienced people or carers. There was also concern about the additional work required from social workers and practitioners.

“There would need to be strong vetting process before the bond is made and regular reviews.”- Family member

In some cases, these respondents also called for greater clarity on the aims of the bond, whether it would need to be legally defined, and how it would work for children and young people in respect to their care order.

We have considered the responses to this consultation and recognise the complexity of this proposal, including both benefits and risks. We recognise that risks include the potential for conflict or breakdown of relationships and the implications in the longer term of a permanent legal position. We are currently exploring non-legally binding policy options, which will offer the stability and security of formalising a meaningful relationship but prevent the risks of a legal agreement. Our next steps are to seek further advice as we consider the options further.



## Stable and loving homes

### Since publication, we have:

- started co-designing the North East Fostering Pathfinder to develop a foster care recruitment and retention programme - the 'Foster with North East' Support Hub will be fully operational by September 2023, and we are continuing to work on a regional comms campaign and Mockingbird expansion across the North East
- raised the National Minimum Allowance for Foster Carers by 12.43% and increased the amount of income tax relief available to foster carers
- run engagement sessions with local authorities in all 9 regions to set out our vision for, and seek views on, Regional Care Cooperatives and fostering reforms. We have issued requirements for the Regional Care Cooperative pathfinders and invited regions to apply to set up a pathfinder
- launched the first Residential Childcare Workforce Census which will enhance our understanding of the children's homes workforce
- issued a joint DfE and DLUHC Ministerial Statement to clarify the national policy position on planning applications for new homes for children
- worked with Ofsted on the scope and objectives of a financial oversight regime to monitor and warn of risks of provider failure across the residential care sector for looked after children
- held 5 meetings of our 'expert group' who are helping us develop a set of overarching standards focussed on the individual needs of children in residential care rather than the settings in which they are placed

### In the next 18 months, we will:

- launch a foster care recruitment and retention programme following initial expressions of interest from over 50% of local authorities
- develop a 'National Support Service' for fostering service providers which will provide in-depth diagnostic support of recruitment practices
- work closely with the successful areas to co-design their Regional Care Co-operative operating model ahead of the start of the pathfinder, with a view to having operational Regional Care Co-operative pathfinders in 2024

- deliver national support with forecasting, procurement and market shaping to local authorities - initially, we will commission an external organisation to deliver the support and over time, the function could be subsumed into the RCCs
- develop a programme to support improvements in the quality of leadership of children's homes and continue to progress work on the professional registration of the children's homes workforce, and will explore how best to gather regular data and information about the children's homes workforce
- with NHSE, jointly lead cross-government work to improve how system partners work together to improve outcomes for children who are currently (or at risk of) being deprived of their liberty and who are in the most complex situations

A fundamental part of 'Built on Love' is to provide children and young people in care with stable and loving homes, which is the focus of our second mission. Both the CMA and Care Review found that local authorities often face significant problems with finding suitable homes for children in care to live. There are not enough homes in the right places providing the support that children need, and some children live far from home as a result. They recommended that moving some local authority functions into new regional bodies would help with improving sufficiency and better enable local authorities to meet the needs of the children in their care, including for unaccompanied asylum-seeking children and children with the most complex needs.

'Built on Love' committed to co-designing 2 pathfinders to test a regional model for providing homes for children in care, called Regional Care Cooperatives (RCCs). Our vision for RCCs includes them delivering better collaboration with health and justice to improve services for children in care, better and more accurate information to improve planning for care, better economies of scale and better support for foster carers. In the consultation we asked respondents what support they thought was needed to set up and make a success of RCCs. We held 9 regional sessions for local authority Chief Executives, Directors of Children's Services and Lead Members to discuss our proposals for RCCs in more detail and seek their views. We heard that many areas see value in coming together to improve the sufficiency of high-quality care placements across regions.

Almost half of respondents to this question mentioned potential difficulties and challenges of the proposed model (180 out of 372, 48%). Respondents referenced concerns about the size of the RCCs and that, as an organisation, they risk being too far removed from the child or young people person, and may lose relationships with local small providers. Some respondents raised difficulties with aligning budgeting, planning and commissioning practices across multiple local authorities.

In the regional sessions for local authorities, we explained that we were keen to hear more about what a sensible ‘footprint’ for the Regional Care Co-operative pathfinders would be. We want this to take account of existing partnerships and relationships with local and regional services. It could, for example, align with the footprint for the Integrated Care Board(s) where possible and practical. We remain committed to co-designing the Regional Care Cooperative pathfinders with the sector. Each will have a steering group with representatives from all local authorities involved plus other local and regional services to work through implementation issues. We will also set up an expert group to co-design the overall approach.

Respondents were also sceptical that the Regional Care Cooperatives model would sufficiently address excessive profit-making in the residential care sector.

“We do not believe that Regional Care Cooperatives can be successful in their stated aim of bringing the financial excesses and many other problems caused by the care marketplace under control” – Senior Leader

Regional Care Cooperatives are part of a package of measures that will collectively address key issues in the system, including placement shortages and excess profit-making. This package also includes:

- £259 million of capital funding to maintain capacity and expand provision in both secure and open children’s homes
- £27 million to recruit and retain more foster parents.
- implementing the Competition and Markets Authority recommendations on:
  - providing national forecasting, procurement, and market shaping support
  - introducing a financial oversight regime
  - reforming standards of care
- considering changes to ensure that planning requirements, or local interpretation of them, are not a barrier to the creation of more homes for children

Regional Care Cooperatives will operate on a larger scale than individual local authorities, giving them increased buying power and allowing them to use tools such as block-purchasing care places for looked after children. They will establish specialist data capabilities to analyse local authority data across the region to get a greater understanding of children’s needs and demand across the area. This will enable more effective planning so that sufficient high-quality provision is available to meet that demand.

One-quarter of respondents provided reasons for their general agreement with the proposal for Regional Care Cooperatives (96 out of 372, 26%). These respondents felt the benefits include:

- providing greater consistency
- reducing disparities in care practices and quality across the country

- enabling each area to look across the regions for elements of good practice

“From [our organisation’s] perspective, [the vision for RCCs] will improve the lives of children...Having the ability to work in RCCs will enable areas to compare and contrast the support offered to young people in their area and also challenge any disparities within their own areas. Will enable each area to look across the regions for elements of good practice.” – a multi-agency professional/leader

Another quarter of respondents suggested additions to the proposed model, or support to implement it (101 out of 372, 27%). These respondents called for clear expectations for all agencies and local authority leaders and clear accountability. A few respondents suggested the value in involving care-experienced individuals in the design, development and delivery of RCCs so the model is based on a good understanding of young people’s needs from those with first-hand experience of the system.

Some respondents commented on funding, and others called for further clarity or guidance. A few respondents, including the Association of Directors of Children’s Services (ADCS) said that the implementation of Regional Care Cooperatives should look to the lessons learned from the implementation of the Regional Adoption Agencies (RAA). ADCS subsequently published their own proposals for Regional Care Co-operatives, which included national conditions for success and differentiated whether action to provide care places for children should take place at local, sub-regional, regional and national level. They felt that local authorities should retain their statutory duties and continue to be responsible for deciding where children in care would live, whereas regions should provide strategic oversight of sufficiency, regional frameworks and find places for children with the most complex needs.

Our regional sessions with local authorities suggested that there were many aspects of the Regional Care Cooperative model that they support, including regional data analysis and forecasting of needs, and regional commissioning for children who need more specialist care. However, they also expressed concerns around Regional Care Co-operatives finding all places for children in care, believing that some functions should remain at local authority level.

We also asked respondents a separate question on whether they had any additional suggestions on improving planning, commissioning and boosting the available number of places to live for children in care. Around two-fifths of respondents to this question suggested a focus on foster carers and residential care staff as a way to increase the number of places for children in care to live (135 out of 347, 39%). They thought this focus should include recruitment, training, support and benefits. Over one-third of respondents suggested changes to current care provision practices with a greater focus on kinship care and local authorities increasing their in-house provision (128 out of 347, 36%). One-fifth of respondents made comments about finances, mostly related to capping the cost of placements and reducing profiteering. (72 out of 347, 21%)

Some respondents also made suggestions about commissioning, including ensuring children and young people in care can keep living locally where appropriate and keeping sibling groups together.

### **Views of children and young people on stable, loving homes**

“We want to stay living in our community, even when we can't be at home. We want to stay close to the people and places we know.” – An organisation on behalf of children/young people

The young people we spoke to through our engagement felt that homes should be tailored to a young person's needs with the option to stay locally should they wish to. They also focused the discussion on support and accommodation choices for care leavers and the transition into independent living. They felt interim support should be available where fully independent options were not yet appropriate, including options like semi-supported accommodation as well as specific options for pregnant parents and young people with disabilities.

“Children need a family rather than a placement” – child/young person

During the consultation period, we heard from a wide range of professionals and sector leaders on the importance of ensuring residential care is focused on helping and supporting young people to thrive, and that care regulations reflect this. However, we also heard concerns about standardisation for anything other than the most basic care expectations. We heard that standards of care for residential care need to be broad and flexible, to meet the individual needs of children and young people.

Sector leaders that we spoke to felt strongly that RCCs need to be co-designed with the sector in order for them to work. They said that the model should ensure that local areas can continue processes where they are working well. We agree with this point and are committed to working with the sector to co-design RCCs.

Analysis of the consultation responses and feedback that we have received at the regional sessions has been used to refine our approach to the RCC pathfinders. We plan to develop RCCs on a staged basis and have developed a set of minimum requirements for the pathfinders. Our long-term vision for RCCs remains unchanged. We expect the pathfinders will enable local partners to test new ways of working together and be a platform to introduce greater regional co-operation. We have invited local authorities to apply to be one of the 2 RCC pathfinders and will announce which regions are successful later this year. Our minimum expectations for the pathfinders include:

- carrying out regional data analysis and forecasting future needs of homes for children in care, in partnership with health and justice

- developing and publishing a regional sufficiency strategy setting out current provision and action to fill gaps
- market shaping, working as one customer with local providers to address needs and commissioning care places required from external providers
- recruiting foster parents through a regional recruitment support hub and improving the support offer to both new and existing foster parents
- developing new regional provision where gaps have been identified, which could include:
  - developing new children’s homes or new models of fostering
  - piloting integrated models of safe, therapeutic care for children who are currently (or at risk of) being deprived of their liberty and who are in the most complex situations
  - developing innovative approaches to supporting children who are looked after and in touch with the criminal justice system
  - delivering new provision for unaccompanied asylum-seeking children (UASC)
  - delivering a new regional approach to running secure children’s home(s), if there is one in the area
- creating the leadership and governance arrangements necessary to allow the RCC to make swift decisions and invest sums of money over the long term

We have heard the importance of workforce across the sector, including the Children’s Homes workforce. We recognise the challenges in recruiting and retaining staff with the right skills. We welcome the Children’s Homes Association’s recruitment campaign launched earlier this year to support children’s homes providers with recruiting staff. We are undertaking research over the next 2 years, starting first with a workforce census which was launched in March 2023.

We are working with the Department for Work and Pensions to look at how careers in the children’s social care sector can be better promoted to those seeking employment through local employment services. We are working with Home Office to share information regarding the immigration routes available for providers to recruit children's home staff internationally. In collaboration with Home Office, we are also looking to set up engagement sessions for local authorities and children's homes providers to share information and feedback on any challenges.

## Corporate parenting responsibilities

### Since publication, we have:

- increased the Leaving Care Allowance to £3,000 from 1 April 2023
- increased the apprenticeship bursary to £3,000 from 1 August 2023
- procured the care leaver covenant contract, increased its value by 30% to extend its impact, and aligned it to the care review missions with over 400 businesses and organisations signed up

### In the next 18 months, we will:

- extend strengthened corporate parenting responsibilities to government departments and relevant public bodies - this will ensure that policies and services that affect them take account of the challenges they face, remove barriers and provide opportunities for them to thrive
- consider responses to this consultation on adding a specific principle for organisations to reduce the stigma and discrimination that children in care and care leavers face
- continue to explore how we can best develop and enhance the currently funded programmes of Staying Close, Staying Put and the work to end rough sleeping to improve the lives of care leavers

In 'Built on Love', mission 3 for children in care and care leavers committed to strengthen and extend corporate parenting responsibilities. We also committed to consult on these plans. In our consultation, we also asked respondents if there were changes they thought would be helpful to make to the existing corporate parenting principles that apply to local authorities.

Over one-third of respondents suggested changes to the existing corporate parenting principles (115 out of 306, 38%). Some suggested additional services or agencies that should have corporate parenting responsibilities, including health bodies, education providers, and housing providers. Others suggested extending the principles to support care experienced people after the age of 25.

A third of respondents to this question mentioned factors they believed were necessary to support the proposed extension of corporate parenting principles (92 out of 306, 30%). Most commonly, respondents said improving understanding of the principles throughout the corporate parenting network would increase consistency across agencies and services.

“Making corporate parenting responsibilities part of mandatory training for all agencies would enhance practice compliance.” - Safeguarding professional

Some respondents said that decisions made by any organisation or agency in the corporate parenting network are often too far removed from the needs and wishes of children and young people, and they should therefore incorporate their views.

Just over one-fifth of respondents to this question stated they had nothing additional to suggest or stated their general agreement with the existing corporate parenting principles (68 out of 306, 22%).

We also asked respondents which bodies, organisations or sectors they felt should be in scope for the extension of the corporate parenting principles. The most common services that respondents thought should be included were:

- health services, including the NHS, mental health services, integrated care boards and others
- education
- police, probation and other justice systems
- housing services including housing association, companies and private housing
- charities, voluntary and community agencies
- employment services and local businesses

Many of the above services were linked to improving outcomes for children in line with the 6 missions. This included improving education and health outcomes, reducing the criminalisation of young people, reducing homelessness and unemployment and increasing support and understanding of the care experience in these services.

While local authorities will remain responsible for fulfilling all their legal duties towards Looked After Children and care leavers - as set out in the Children Act 1989 – we believe other government departments and relevant public bodies can also play an important role in improving their experiences and outcomes. Our proposals in relation to corporate parenting will not impact on the statutory duties of local authorities under the Children Act 1989 to accommodate Looked After Children.

Our ambition therefore remains to extend corporate parenting responsibilities to government departments and relevant public bodies. We believe this will ensure that policies and services that affect children in care and care leavers better take account of the challenges that they face and provide opportunities for them to thrive.

In light of the consultation responses, we are refining our proposals on primary legislation to support corporate parenting (which will be enacted when Parliamentary time allows). We will engage with individual departments and agencies on our detailed plans for legislation, to reach agreement on any future arrangements, including on how the proposed responsibilities will be implemented and what the accountability arrangements should be, with a pre-legislation consultation from Autumn 2023.



## Support for the social work workforce

### Since publication, we have:

- consulted on proposals to introduce national rules on the engagement of agency social work resource in local authority children's social care
- commissioned a number of Early Career Framework (ECF) Early Adopter local authorities - we have also appointed the Expert Writing Group who will write the framework of skills and knowledge which is at the heart of the ECF
- launched the Child and Family Social Worker Apprenticeship Employer Support Fund, which will support local authorities to offer up to 500 child and family social worker apprenticeships
- launched the national workload action group, which convenes a group of experts to identify and provide recommendations to address unnecessary drivers of workload for child and family social workers

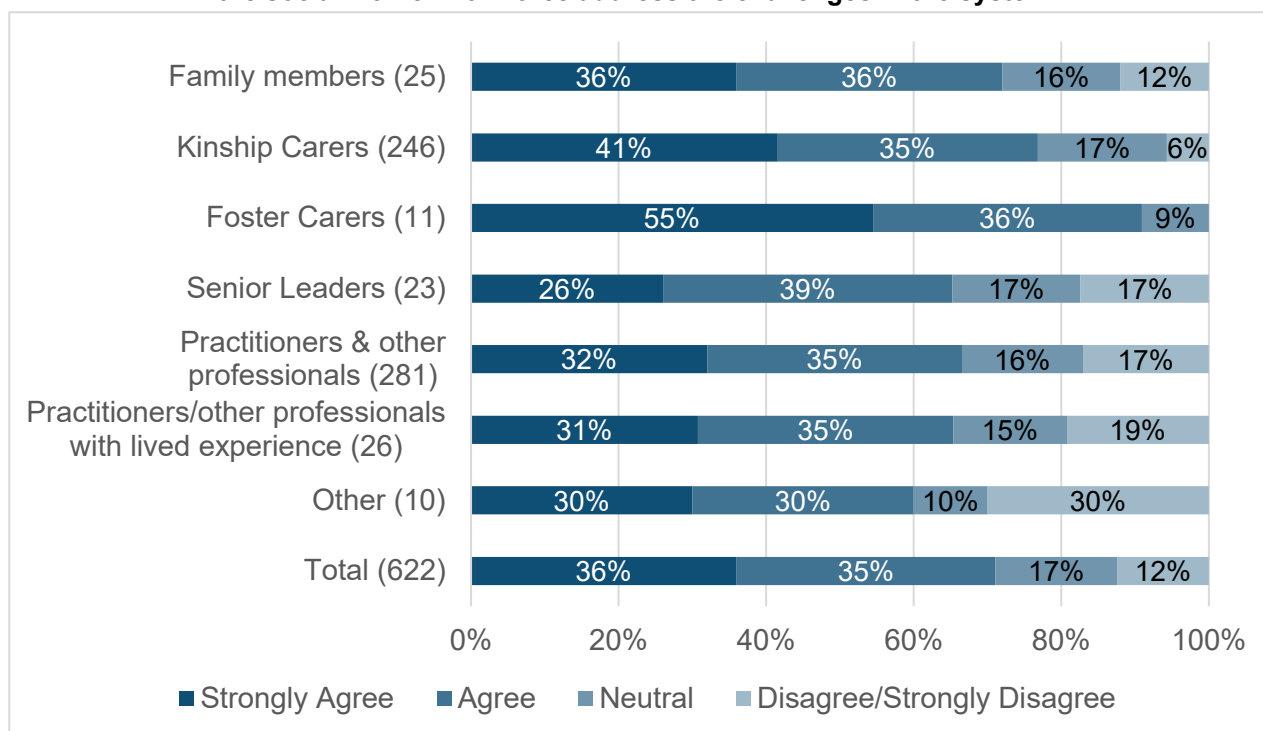
### In the next 18 months, we will:

- formally respond to the consultation on agency social work later in the year
- launch the national virtual hub in early 2024 which will provide a one-stop-shop of support for local authorities to support their recruitment and retention strategies - this will include support to help local authorities comply with the new national rules on the engagement of agency social work resource
- consult on statutory guidance for national rules on local authority use of agency child and family social workers, the first of which will come into force in Spring 2024
- consult on the Early Career Framework document setting out the skills needed by social workers - we will continue to work with the ECF Early Adopter local authorities and stakeholders, to design the programme and explore national implementation from September 2026, and will include further detail on the overall programme design and implementation plans alongside the consultation on framework document)
- appoint an independent, expert supplier to provide resources on retention, which will be hosted on a national virtual hub

'Built on Love' recognises the value and importance of social workers in delivering our ambitions for transforming children's social care. Within the strategy we set out proposals focused on supporting the social worker workforce and addressing challenges in the system. Responses were generally supportive of these proposals: 71% of respondents

agreed or strongly agreed with the proposals (442 out of 622), compared to 12% who disagreed or strongly disagreed (77 out of 622).

**Figure 5: Responses to question Q26: Overall, to what extent do you agree that our proposals on the social worker workforce address the challenges in the system?**



We asked if respondents had any further priorities for longer-term workforce reform. A key theme in response to this question was prioritising improvements to operational delivery and reducing workforce pressures. Respondents emphasised the benefits of reducing caseloads and decreasing bureaucracy to free up time for practitioners to build relationships with children, young people and families.

Social workers have told us (including via the concurrent consultation on the child and family social worker workforce) that they do not always feel supported, valued and trusted. We have heard that there is not enough recognition of the difficult decisions they make on a daily basis, nor of the skills, expertise and challenge required for the role, and that social workers can feel frustrated by the lack of time spent with children and families.

We agree that it is important for social workers to spend more time with children and families. This is a key ambition of the reform strategy, and why it includes measures to tackle unnecessary bureaucracy, improve case management systems (CMS) and address sufficiency issues in the social worker workforce. The newly established National Workload Action Group will develop recommendations to address workload concerns. We have procured Research in Practice to support this work and produce resources to embed the social worker employer standards. Social Work England is taking forward its commitment in 'Built on Love' and considering its approach to asking all social workers how much time they are spending in direct practice, including how they are using it to support their professional development. Building on this the department will work

collaboratively across the sector to create a culture that better allows social workers' practice to thrive.

Respondents also felt that access to the right level of support and supervision is important for social workers' wellbeing, and to improve practice. These factors were linked to improving social worker recruitment and retention, which in turn provides consistency of care for children, young people and families. Respondents saw these workforce issues as integral to the wider aims of our reforms. We agree with that sentiment, which is why increasing recruitment and retention will remain fundamental parts of the reform programme.

“Being a Social Worker is a huge privilege but there is a high risk of burn out and PTSD from the cases that we work with therefore to keep people in the role there needs to be time for the managers to offer proper clinical supervision to support the staff to decompress.” – social work practitioner

Some organisations who responded highlighted the impact of public perceptions of social work and welcomed the opportunity to celebrate the value of social work. There were some calls for a national recruitment campaign to promote social work. We will work with Social Work England to inform and educate people on the role social workers place within society, whilst promoting social work as the rewarding profession it is.

“The status of the profession, how it is perceived and valued in society, is paramount but we continue to await a national campaign to promote the value of child and family social workers from government.” – the Association of Directors of Children's Services (ADCS)

Another priority for respondents is training and development. There was a general agreement with proposals to increase apprenticeships through the employer support fund, and through wider use of the bursaries within university courses. Respondents pointed to the need for more specialist training for social work practitioners, as well as for other professionals supporting children and families. Respondents felt this should include training on Special Educational Needs and Disabilities (SEND), the impact of trauma, trauma informed practice, and immigration.

We want all child and family social workers to benefit from high quality professional development. Ensuring social workers have the skills and knowledge they need is vital to improving outcomes for children and families. We will introduce a new ECF for social workers, which will significantly extend the training and support social workers receive in the early stages of their career, helping to equip them with the knowledge and skills they need and retain them in the profession. We are already investing in high-quality CPD at key stages of a social worker's career, and will continue to do so.

We will also strengthen the workforce enabler in the proposed National Framework so that it is clear that social workers at all levels should operate in a working environment that enables them to thrive and provide the very best support to children and families.

### **Views of children and young people on the social work workforce**

“Someone who gets to know me and sticks around. I have only ever been taken out by my social worker once. She taught me how to eat chicken the right way but she left shortly after” – young person in care

In the consultation we asked children and young people, what they felt would make a great social worker. We received 96 responses to this question.

Two-thirds of respondents commented on important characteristics for social workers, including being kind, caring, helpful and supportive. The ability to listen was mentioned the most. Other respondents said that social workers must be able to make time for regular visits and communicate regularly. Ten percent of respondents highlighted the need for consistency and stability, and some respondents spoke about the importance of having the same social worker to form long lasting relationships.

During the consultation period, young people also told us that the stability and quality of a social worker makes a positive difference. They spoke about being frustrated by a constant turnover of social workers and having to retell their traumatic experiences. Young people also said that children’s social care staff should be valued and the profession should be seen as desirable. They said that this inconsistency meant building a good rapport was difficult. They also felt there should be more mental health support for practitioners, which will help them do their job better and make a difference to their lives.

Alongside responses to the online consultation, we heard from approximately 220 social workers and sector organisations during the consultation period. We are pleased that there is strong recognition from practitioners and sector leaders that the government has sought to address recruitment challenges through programmes such as Step Up to Social Work and Frontline, and through the reforms proposed in the strategy. However, the practitioners we spoke to felt that more needed to be done. This included a focus on career progression and changing the public image and narrative around social work.

We heard widespread enthusiasm for the ECF, with an emphasis that the ECF needs to be supportive and not limit the wide range of career paths that social workers can take. We also heard views that progress through the ECF programme should recognise that, for many social workers, 5 years in the profession is no longer ‘early’ in their career, and that progression should be linked to pay to effectively improve retention. We do not intend to intervene in individual local authority employers’ decisions about what they pay their employees. Local authorities have their own existing pay and grading structures for

their employees. It is likely employees will move up their own local authority pay and grade structure during the 5 year ECF programme. We are considering how we can bring greater transparency on pay and different social worker role types, which would provide a better evidence base to understand the impact of pay on retention and career development.

## System reform and delivery

### Since publication, we have:

- spoken to practitioners, leaders, and those with lived experience, to understand how good practice is already being shared, both nationally and regionally, and what more is needed to ensure we collectively build upon what is working well
- separately consulted on the Children's Social Care National Framework and Dashboard indicators, and have published a response to this consultation, which is available here: <https://www.gov.uk/government/consultations/childrens-social-care-national-framework-and-dashboard>
- continued to work closely with Ofsted on how they can continue to act as a lever for improvement, in line with reform and considering how the local authority inspection framework (ILACS) might evolve to mirror reform priorities and learning and evidence from the reform programme. Ofsted have indicated that they remain confident that they will be able to adapt their approach to inspection as long-term reforms unfold and we publish new statutory guidance)
- piloted the Enhance programme with three persistent 'Requires Improvement' local authorities - this programme tested a new diagnostic support model and worked with local authorities to develop evidence-based and data-driven improvement plans, and we are now supporting these local authorities to implement their findings and evaluate the overall impact the programme has on local authority improvement
- launched an internal evaluation programme looking at the Department's approach to children's social care improvement and intervention to make sure our funding is reaching the right local authorities at the right time
- launched a consultation on a revision to the Information Sharing Guidance for practitioners providing safeguarding services to children, young people, parents and carers
- published our policy paper on multi-agency information sharing

### In the next 18 months, we will:

- continue to work closely with the sector to establish and deliver a 'learning loops' strategy to support sector collaboration, sharing learning and embedding the most impactful and innovative approaches to practice across the system
- continue to work closely with Ofsted to explore what changes to inspections and regulations across the sector are required to make sure they reflect new policy and drive improvement

- issue the Children’s Social Care National Framework as statutory guidance and continue to test and develop the indicators and Dashboard
- use learning events and forums to support local authorities on this reform journey, including helping areas to improve outcomes through embedding the practice described in the National Framework, and discussing emerging findings from the Pathfinder and pilot programmes
- publish a CSC Data Strategy by the end of the year

## System reform

In the section of the strategy focused on improving the system, we asked what would help ensure we have a self-improving children’s social care system that continues to share and apply best practice, so that it can learn from itself. We recognise that reforms must be replicable in local authorities, even where there are differences in circumstances or demographics. We will listen to local authorities and their partners so that there is sufficient capacity for reform to be embedded alongside improvement and intervention.

One-fifth of respondents (predominantly practitioners and professionals) suggested that changes to workload, working practices and culture were needed to help the system learn and improve. (80 out of 406, 20%) This included a culture of taking responsibility at all levels and fully considering complaints and feedback to develop learning. However, some respondents felt that issues around retention and workforce capacity constraints are barriers to learning, as they hamper practitioners’ and professionals’ ability to take time to reflect and learn.

“The workforce felt that having a feedback loop between children and families and practitioners was essential and that we should focus on ‘Lessons of Success’ in line with ‘Line of Sight Reviews’ ensuring that we embrace learning in a positive and strength based manner... if something has worked well that we have the time and space to share learning nationally and regionally, this should include voluntary sectors and large organisations... more people to share local work from LAs to boost morale and pride across public sector.” – Local Authority Children’s Services

One-fifth of consultation responses, half of which were from kinship carers, highlighted the importance of listening and engaging with people with lived experience, so that their feedback is fed into reflective practices and learning. (87 out of 406, 21%)

“I would want to speak with as many carers and children as possible regularly so that I know if anything starts going wrong.”- Kinship carer

A further fifth of respondents also commented that communication and working across multiple agencies would promote best practice by ensuring information about what is working is communicated with social work practitioners and other professionals working to safeguard and support children, young people and families. (83 out of 406, 20%) Some also noted that it was important this included school and third sector and community organisations.

## Delivery

In ‘Built on Love’, we described the phases of activity for reform, the outcomes we want to achieve and what measures we will use to determine success. In the consultation we asked how respondents thought we could ensure the delivery of reform is successful.

One third of respondents (predominantly practitioners and professionals) said that additional investment is essential to the successful delivery of reform (145 out of 472, 31%). Some people commented that sustainable, long-term funding was required to take forward meaningful implementation.

“This reform needs the right financial investment across the whole system if we want to see real change and improve outcomes for children, young people and families”. - Safeguarding professional

We are investing £200 million over the first phase of the reform to test and learn from our approach. In ‘Built on Love’, we recognised that subsequent phases of reform will require more investment and a wider programme of support.

A third of respondents to this question mentioned the need to focus on children, young people, families and carers, and the support they need, and that their voices shape the reform programme (142 out of 472, 30%). Similarly, a quarter of respondents (mostly practitioners and professionals) highlighted the importance of listening to social work practitioners, other agencies and professionals across sectors that work with children, young people and families (122 out of 472, 26%). Most respondents commented that this would increase the sharing of information and prevent working to a one-size-fits-all approach.

Several views in the consultation emphasised the need for national consistency across all local authorities. Respondents also mentioned the need to maintain consistency at national government level by ensuring the reform programme has universal support.

“Any reforms must be sustainable and capable of being replicated in any local authority. ... If they are to deliver for vulnerable children and families everywhere, they have to be demonstrably achievable everywhere.” – Ofsted



Respondents told us that they wanted better accountability, pay and workforce retention so that current workforce pressures and burdens facing practitioners and professionals do not create a barrier to successful implementation.

We are working to support local authorities to strengthen their approach to recruitment and retention and help stabilise the workforce as outlined in the previous section.

The Children’s Social Care National Framework was published for consultation in February 2023 and will be issued as statutory guidance in December 2023. Through the National Framework the government will set greater national direction for children’s social care, bringing a greater consistency to practice. We think that alongside issuing the National Framework it is right to provide advice for local authorities on what they might want to do differently in response to the new statutory guidance. We are developing a plan to support local authorities to identify areas of practice that are preventing children and families from having positive experiences with children’s social care and from achieving the best possible outcomes. We will publish this plan, along with the National Framework, by the end of the year.

### **Views of children and young people**

“Ask all of us and actually hear what we are saying!” – Child in care, under 11 years old

We asked children and young people what they thought would be the most important thing to change in children’s social care if they were Prime Minister. 100 children and young people answered this question.

Most of the children and young people who responded mentioned more funding, including funding for children and young people, care leavers, carers, the local authority, and additional services. Others said that they would reduce workload pressures on professionals so they could spend more time with them and build relationships. They also commented they would like to reduce the number of social workers a child has.

Children and young people also said that kinship care needs more recognition and highlighted the benefits of living with and being cared for by extended family networks. Some mentioned that financial support for kinship care should match foster care.

## Next steps

The Secretary of State for Education, Rt Hon Gillian Keegan MP, has described 'Built on Love' as the first step towards achieving once-in-a-generation reform. It is a commitment to making determined, focused, and long-term change. In 'Built on Love', we explained that over the next 2 years we would be focussed on Phase One of reform, which includes addressing urgent issues, setting national direction, and laying the groundwork for future reform. In this consultation response we have set out the steps we have already begun to take following publication of 'Built on Love', and how delivery will continue over the next 18 months to achieve our aspirations for the system.

The responses we received to this consultation, and through the events we held whilst it was open, have helped us develop and refine our plans for reform. In some cases the responses have reaffirmed how important it is to act now to offer additional support. For example, we recognise the level of interest in support for kinship carers and remain committed to publishing a national kinship care strategy by the end of 2023. We will also take forward the legislative reforms and guidance changes to remove the local connection requirement for care leavers seeking to access social housing.

In other cases, we want to continue building on what we have heard to understand what good looks like. For example, we will use consultation responses to inform the models and approaches to parental representation we test in the Families First for Children Pathfinder. We will contact respondents who want to share more detailed information about the services they have received or provided so we can understand what good looks like. We will also use learning from the Risk Outside the Home report (due in Autumn 2023), alongside feedback to this consultation, to inform expectations for effective multi-agency responses to extra familial harm and exploitation in the wave 2 pathfinder areas and more widely.

We have also reflected on where we can make changes to policy direction now in response to the findings from this consultation. We have heard local authorities' concerns about the potential scope of RCC pathfinders, particularly as these would operate under current legislation. We are proposing to develop the pathfinders on an incremental basis, with certain elements that we'd need to see as a minimum now and an expectation that the pathfinder would expand its remit in future after we have tested and evaluated the concept. We will consult on our pre-legislative proposals on extending strengthened corporate parenting responsibilities to government departments and relevant public bodies for children in care and care leavers. As part of this, we will consider responses to this consultation on adding a specific principle for organisations to reduce the stigma and discrimination that children in care and care leavers face.

In all cases we look forward to continuing to work in partnership with the sector, and in ongoing dialogue with stakeholders of all kinds, including those with experience of children's social care.

## Annex A: Methodology

The main consultation involved an online survey comprising 31 questions. Alongside this we published a Guide to the Implementation Strategy for Children and Young People and included 9 specific consultation questions for child and young people under 18, or care leavers under the age of 25.

The following data was analysed:

- 902 responses to the main consultation
- 108 responses to the children and young people’s consultation
- 92 responses from adults to the children and young people’s consultation
- 33 email submissions made to the consultation, largely from representative groups and organisations

We commissioned York Consulting to conduct the full analysis.

The data was analysed using a combination of qualitative analysis software (Nvivo) and Excel. Nvivo was used to code qualitative responses to the consultation. Excel was used to analyse responses to quantitative questions.

In total 902 responses were received to the main consultation. Questions 1 to 6 of the main consultation asked questions about the respondents. Respondents were categorised into 7 main groups as shown in Table 1 below. Questions seeking respondents’ views began at question 7.

**Table 1: Main consultation respondent categories**

Respondent category	Category description	Number	Percentage
Family members	Birth parents, adoptive parents, family networks with no caring arrangements	38	4.2%
Kinship carers	Kinship carers and those with special guardianship orders	405	44.9%
Foster carers	Foster carers	12	1.3%
Senior leaders	Senior leaders from local authorities and other sector organisations	26	2.9%
Practitioners and other professionals that work with children and families	Social work management, social worker or social work practitioners, safeguarding professionals (health and police), education professionals, professionals supporting children and families, other professionals, and representative groups	374	41.5%

Practitioners and other professionals with lived experience	Respondents that identified as both a practitioner or professional and a person with lived experience of the children's social care system	29	3.2%
Other types of respondents	Academic and other organisations or professionals	18	2.0%
<b>Total</b>		<b>902</b>	<b>100%</b>

Source: DfE Consultation responses May 2023. Base: 902 respondents

## Children and young people's consultation

In total, 108 responses were received to the children and young people's consultation. There were 3 groups of respondents:

- those who identified themselves as a child (47)
- those who identified themselves as adults responding on behalf of a child (58)
- those who identified themselves as a child's response collated by an organisation (3)

In addition, there were 92 responses from adults not responding on behalf of young people who answered the children and young people's questions. These responses were analysed alongside the main consultation questions.

## Annex B: List of organisations that responded to the consultation

We want to thank all the individuals, organisations, charities, multi-agencies and local authorities for engaging and responding to the consultation. Below is a list of those who were content with being named in the final report.

- ADCS (Association of Directors of Children's Services)
- Adfam
- Alliance for children in care and care leavers
- Article 39
- Barnsley College
- Become - the national charity for children in care and young care leavers
- Birth Companions
- Blue Cabin CIO
- Children Heard and Seen
- County Councils Network
- East Sussex
- Families in Harmony
- Family Law Bar Association
- Family Solutions Plus
- Gloucestershire ICB
- Havering
- Hull Safeguarding Children Partnership
- Intentional parenting community organisation
- Kinship Carers
- Local Government Association
- London's Independent Chairs and Scrutineers of Local Safeguarding Children Partnerships
- Mulberry Bush Organisation
- National Children's Bureau
- NHS England – South West Region
- NHS England South West - Quality Team
- NHS England South East
- North-East North Cumbria ICB (North ICP Designated Safeguarding Professionals)
- North-East Lincolnshire Council Children Services
- Ofsted
- Parent and Carer Alliance CIC
- Parents, Families and Allies Network
- Refuge
- Refugee and Migrant Children's Consortium

- Regional Adoption Agency Leaders group
- SFAC
- Social Care Network Solutions Limited
- Social Work England
- South West London Integrated Care Board
- Staffordshire and Stoke-On-Trent Integrated Care Board
- Suffolk and North East Essex ICB – NEE Alliance
- Surrey Heartlands ICB
- The Care Experienced Movement
- The Challenging Behaviour Foundation
- The Fostering Network
- Warrington Safeguarding Partnership
- West Nottinghamshire College
- West Sussex county council
- Youth Justice Board



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**Open Report on behalf of Andrew Crookham,  
Deputy Chief Executive and Executive Director - Resources**

Report to:	<b>Children and Young People Scrutiny Committee</b>
Date:	<b>19 April 2024</b>
Subject:	<b>Children and Young People Scrutiny Committee Work Programme</b>

**Summary:**

This item enables the Committee to consider and comment on the content of its work programme to ensure that its scrutiny activity is focused where it can be of greatest benefit. The Committee is encouraged to highlight items that could be included for consideration in the work programme.

**Actions Required:**

- (1) To review and agree the Committee's work programme as set out in this report.
- (2) To highlight for discussion any additional scrutiny activity which could be considered for inclusion in the work programme.

**1. Background**

Current Items

For reference, the Committee's items for this meeting are set out below: -

19 April 2024			
	Item	Contributor	Purpose
1.	Re-commissioning of the Lincolnshire Leaving Care Service	Bridie Fletcher, Senior Commissioning Officer – Children's Strategic Commissioning  Amy Allcock, Commissioning Manager - Commercial	Pre-Decision Scrutiny (Executive Councillor decision between 24 April – 3 May 2024)

<b>19 April 2024</b>			
<b>Item</b>		<b>Contributor</b>	<b>Purpose</b>
<b>2.</b>	Children and Young People's Mental Health Transformation Programme	Kevin Johnson, Commissioning Manager - Children's Mental Health, LD and Autism Charlotte Gray, Head of Service – Children's Strategic Commissioning	Policy Review
<b>3.</b>	Families First for Children Pathfinder Programme	Andy Cook, Head of Service - Families First for Children Pathfinder	Policy Development

Planned Items

The Committee's planned items are listed below:

<b>14 June 2024</b>			
<b>Item</b>		<b>Contributor</b>	<b>Purpose</b>
<b>1.</b>	Ofsted Inspection of Children's Services - Improvement Plan	Andrew Morris, Head of Service - Leaving Care, Semi-Independent Living and Unaccompanied Children	Inspection Outcome
<b>2.</b>	Children in Care Transformation Programme Update	Matt Clayton, Interim Head of Capital Reform and Education Sufficiency Tracey Robinson, Programme Manager – Sector Led Improvement & Children in Care Transformation Tara Jones, Assistant Director – Children's Safeguarding	Policy Review

<b>14 June 2024</b>			
<b>Item</b>		<b>Contributor</b>	<b>Purpose</b>
<b>3.</b>	New Lincolnshire Secure Children's Home build – Main Works Contract (EXEMPT)	Matt Clayton, Interim Head of Capital Reform and Education Sufficiency Dave Pennington, Head of Property Development Dave Clarke, Service Lead - Secure Estate Rachel Freeman, Head of Service Children in Care and Residential Estates	Pre-Decision Scrutiny (Executive decision on 2 July 2024)
<b>4.</b>	Gosberton House Academy - New Block Extension and External Works as part of the SEND Building Communities of Specialist Provision Strategy (EXEMPT)	Eileen McMorrow, Programme Manager SEND Strategy Dave Pennington, Head of Property Development	Pre-Decision Scrutiny (Leader Decision between 24-28 June 2024)
<b>5.</b>	Primary School Mobile Replacement Scheme (EXEMPT)	Dave Pennington, Head of Property Development Neal Kathel, Project Team Leader, Corporate Property	Pre-Decision Scrutiny (Leader decision between 24-28 June 2024)

<b>19 July 2024</b>			
<b>Item</b>		<b>Contributor</b>	<b>Purpose</b>
<b>1.</b>	Youth Justice Plan	Jo Kavanagh, Assistant Director – Early Help Tracey Evans, Head of Service – Future4Me	Pre-Decision Scrutiny (Council decision on 13 September 2024)
<b>2.</b>	Holiday Activities and Food Programme (HAF) Annual Report	Nicky Myers, Interim Head of Service Early Years and Childcare Support	Policy Review
<b>3.</b>	Service Level Performance Reporting Against the Success Framework 2023-24 Quarter 4	Jo Kavanagh, Assistant Director – Early Help	Performance Scrutiny

19 July 2024			
Item		Contributor	Purpose
4.	Minerva House project – remodelling to provide accommodation for Children’s Services (EXEMPT)	Dave Pennington, Head of Property Development Wendy Lanes, Project Manager - Corporate Property	Pre-Decision Scrutiny (Leader Decision between 24-31 July 2024)

6 September 2024			
Item		Contributor	Purpose
1.	Lincolnshire Safeguarding Children Partnership (LSCP) Annual Report 2023	Chris Cook, Chair of LSCP Stacey Waller, LSCP Manager	Yearly Update
2.	Childcare Sufficiency in Lincolnshire	Nicky Myers, Interim Head of Service Early Years and Childcare Support Geraldine O'Neill, Sustainability and Development Manager	Policy Review
3.	Service Level Performance Reporting Against the Success Framework 2024-25 Quarter 1	Jo Kavanagh, Assistant Director – Early Help	Performance Scrutiny

18 October 2024			
Item		Contributor	Purpose
1.	Young Carers Scrutiny Review – Final Report and Recommendations from Scrutiny Panel A	Cllr Phil Dilks, Chairman of Scrutiny Panel A Tracy Johnson, Senior Scrutiny Officer Jo Kavanagh, Assistant Director - Early Help	Scrutiny Review Activity
2.	Update on the Building Communities of Specialist Provision Strategy	Eileen McMorrow, Programme Manager SEND Strategy Dave Pennington, Head of Property Development	Policy Review (Yearly Update)

<b>18 October 2024</b>			
<b>Item</b>		<b>Contributor</b>	<b>Purpose</b>
<b>3.</b>	Children's Services Annual Statutory Complaints Report 2023-24	Jo Kavanagh, Assistant Director - Early Help	Performance Scrutiny

<b>6 December 2024</b>			
<b>Item</b>		<b>Contributor</b>	<b>Purpose</b>
<b>1.</b>	Service Level Performance Reporting Against the Success Framework 2024-25 Quarter 2	Jo Kavanagh, Assistant Director – Early Help	Performance Scrutiny

<b>17 January 2025</b>			
<b>Item</b>		<b>Contributor</b>	<b>Purpose</b>
<b>1.</b>	Children’s Services Budget Proposals 2025/26	Heather Sandy, Executive Director – Children’s Services Mark Popplewell, Strategic Finance Lead – Children’s Services	Budget Scrutiny / Pre-Decision Scrutiny
<b>2.</b>	Attendance in Schools, Elective Home Education and Children Missing Education Annual Report 2023/24	Jill Chandar-Nair, Inclusion and Attendance Manager	Annual Report

<b>7 March 2025</b>			
<b>Item</b>		<b>Contributor</b>	<b>Purpose</b>
<b>1.</b>	Lincolnshire School Performance 2023 - 24	Matt Spoons, Head of Service - School Standards Nicky Myers, Interim Head of Service Early Years and Childcare Support Viki Thomas, Principal Adviser Early Education	Performance Scrutiny

7 March 2025			
Item		Contributor	Purpose
2.	Service Level Performance Reporting Against the Success Framework 2024-25 Quarter 3	Jo Kavanagh, Assistant Director – Early Help	Performance Scrutiny

## 2. Conclusion

The Committee is invited to review, consider and comment on the work programme as set out above and highlight for discussion any additional scrutiny activity which could be included for consideration in the work programme. A list of all upcoming Forward Plan decisions relating to the Committee is also attached at Appendix A.

## 3. Appendices

These are listed below and attached at the back of the report	
Appendix A	Forward Plan of Decisions relating to the Children and Young People Scrutiny Committee

## 4. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Tracy Johnson, Senior Scrutiny Officer, who can be contacted on 07552 253814 or by e-mail at [tracy.johnson@lincolnshire.gov.uk](mailto:tracy.johnson@lincolnshire.gov.uk).

**FORWARD PLAN OF DECISIONS RELATING TO CHILDREN'S SERVICES FROM 02 APRIL 2024**

DEC REF	MATTERS FOR DECISION	REPORT STATUS	DECISION MAKER AND DATE OF DECISION	PEOPLE/GROUPS CONSULTED PRIOR TO DECISION	DOCUMENTS TO BE CONSIDERED	OFFICER(S) FROM WHOM FURTHER INFORMATION CAN BE OBTAINED AND REPRESENTATIONS MADE (All officers are based at County Offices, Newland, Lincoln LN1 1YL unless otherwise stated)	DIVISIONS AFFECTED
I030828	Lincolnshire Leaving Care Service from April 2025	Open	Executive Councillor: Children's Services, Community Safety, Procurement and Migration Between 24 April 2024 and 3 May 2024	Representatives from Children's Services teams (social care and IROs); care leavers and other stakeholders involved in services for care leavers; Children's Services DLT	Reports	Senior Commissioning Officer E-mail: <a href="mailto:Bridie.fletcher@lincolnshire.gov.uk">Bridie.fletcher@lincolnshire.gov.uk</a>	All Divisions
I028654	Gosberton House Academy - New Block Extension and External Works as part of the SEND Building Communities of Specialist Provision Strategy	Exempt	Leader of the Council (Executive Councillor: Resources, Communications and Commissioning) Between 24 June 2024 and 28 June 2024	Children and Young People Scrutiny Committee	Reports	Head of Property Development E-mail: <a href="mailto:dave.pennington@lincolnshire.gov.uk">dave.pennington@lincolnshire.gov.uk</a>	
I030411	Primary School Mobile Replacement Scheme	Exempt	Leader of the Council (Executive Councillor: Resources, Communications and Commissioning) Between 24 June 2024 and 28 June 2024	Children and Young People Scrutiny Committee	Reports	Head of Property Development E-mail: <a href="mailto:dave.pennington@lincolnshire.gov.uk">dave.pennington@lincolnshire.gov.uk</a>	All Divisions

I032116	New Lincolnshire Secure Children's Home Build - Main Works Contract	Exempt	Executive 2 Jul 2024	Directorate Leadership Team Corporate Leadership Team Legal Services Finance Services Children and Young People Scrutiny Committee	Reports	Interim Head of Capital Reform and Education Sufficiency E-mail: <a href="mailto:matthew.clayton@lincolnshire.gov.uk">matthew.clayton@lincolnshire.gov.uk</a>	Sleaford
I032178	Minerva House project – remodelling to provide accommodation for Children's Services	Exempt	Leader of the Council (Executive Councillor: Resources, Communications and Commissioning) Between 24 Jul 2024 and 31 Jul 2024	Children and Young People Scrutiny Committee	Reports	Head of Property Development E-mail: <a href="mailto:dave.pennington@lincolnshire.gov.uk">dave.pennington@lincolnshire.gov.uk</a>	Holbeach