

Appendix A

Children's Services Safe and Healthy

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1. Executive Summary

This commissioning strategy reviews how Children's Services is performing to ensure that Lincolnshire children and young people are safe and healthy, adopting a Signs of Safety approach to understand what is working well, what we are worried about and establishes priorities to address what we are going to do about it.

The objectives we will accomplish in order to ensure that positive outcomes for children and young people are achieved include:

Outcome 1: Children are safe and protected from harm

- **Objective 1** - Undertake a 'Deep Dive' of the current and recent LAC cohort to ensure children are transitioning to LAC status within appropriate thresholds and evaluate if more could be done to avoid children becoming LAC.
- **Objective 2** – Deliver the Partners in Practice programme to improve practice in Lincolnshire, transform the quality of Children's Social Care Services and Early Help arrangements, and support reform of the wider system within Children's Services.
- **Objective 3** - Develop a local model of suitable and appropriate accommodation options that effectively manages the cohort of young people requiring accommodation with support and adopt a multiagency approach to target support to the right young people, at the right time, in order to keep children safe in their families where appropriate to do so and to reduce the overall LAC population.
- **Objective 4** - Undertake a review of existing CAMHS commissioning arrangements, aligned to the Future in Mind Strategy, to inform future intentions in partnership with other agencies.

Outcome 2: Children and families are supported as soon as problems emerge

- **Objective 5** - Review the effectiveness of early intervention services including the development of a performance management programme to understand the quantifiable outcomes delivered by the service and to help reduce the need for statutory intervention.
- **Objective 6** - Improve understanding of why more complex young people are coming through the front door in order to determine what can be done to identify them in order to intervene earlier and remedy the situation.
- **Objective 7** - Develop and monitor delivery of an Emotional Wellbeing Service providing direct intervention to school-aged Lincolnshire children and their families experiencing emotional wellbeing issues.

Outcome 3: LAC feel supported and reach adulthood happy and healthy

- **Objective 8** - Undertake targeted marketing and recruitment campaigns to support the growth of the in-house Foster Care market.
- **Objective 9** - Improve support to in-house foster carers to increase retention rates and commence a rolling programme of learning from exit interviews.
- **Objective 10** - Targeted work to support the recruitment and retention of and the ongoing development of in-house Residential Children's Workers leading to the creation of a flexible support service that can meet the needs of all LAC including those with the most complex needs.

In achieving these outcomes, services will be commissioned to ensure they provide children, young people and their families with the right support, of the right quality, in the right place, at the right time and for the right price.

2. Background & Introduction

The purpose of this commissioning strategy is that children growing up in Lincolnshire are safe and healthy. This can be achieved by children developing in homes where they feel safe and where they are supported to make decisions to live a healthier life.

The principle that underpins the Safe and Healthy (S&H) strategy is championing the voice of the child, ensuring that children and families are at the heart of how support is planned and delivered to help children stay safe and remain healthy both physically and emotionally. Safeguarding children is a key priority and underpins all activity within Children's Services.

This commissioning strategy has been developed following an interpretation analysis of a number of factors including:

- Performance data and management information
- Finance position
- Local and national marketplace
- Policy and Practice
- Stakeholder engagement
- Direction of travel

Deriving this information has taken place utilising a number of formats comprising desktop analysis; multi-disciplinary stakeholder discussion; and service expert gatherings. The strategy is supported by and is embedded in conjunction with a number of key strategies and policies including (not an exhaustive list):

- Early Help Strategy
- Joint Strategic Needs Assessment
- Joint Health & Wellbeing Strategy
- Child Poverty Strategy
- Pledge to Looked After Children (LAC)
- LAC Strategy
- LAC Placement Sufficiency Strategy
- Participation Strategy
- Youth Housing Strategy
- Care Leaver's Charter
- Joint Commissioning Framework for Children and Young People (CYP) with Special Educational Need and Disability (SEN&D)
- SEND Code of Practice 0-25 years 2015

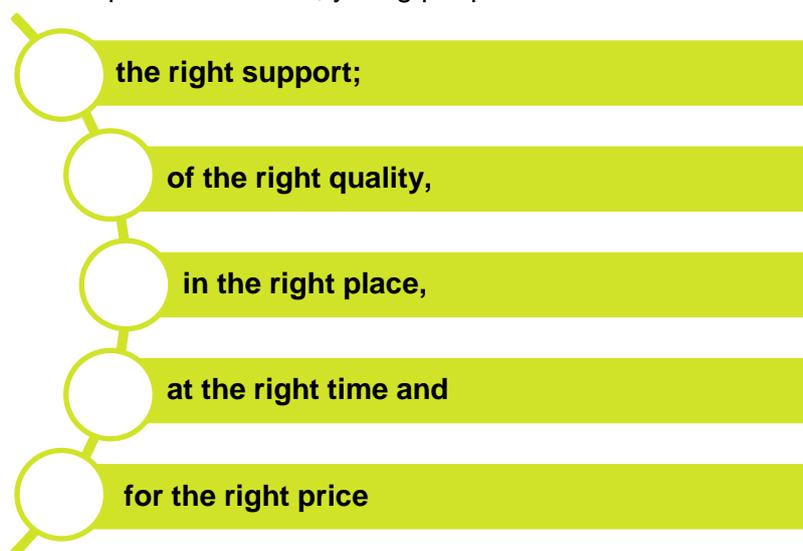
Whilst this strategy is focussed on the outcome of children being S&H, there are many interdependencies with the other Children's Services commissioning strategies: Readiness for School, Learn and Achieve, and Readiness for Adult Life. The strategy forms part of the Council's Business Plan outcome that *'our communities are safe and protected from harm'* and has an impact on the other commissioning strategies which support this outcome.

The S&H Strategy, which includes detail on children residing in care, offers a profile of how the vision of high aspirations for the wellbeing of all Lincolnshire children can be delivered. In this respect, it clearly outlines the direction of travel for maintaining and improving children's mental health and emotional wellbeing.

Good mental health and emotional wellbeing helps ensure children do better in every way – enjoying childhood and making friendships; learning and achieving at school; and developing resilience as they transition to adulthood and aim to fulfil their potential.

3. Scope of the Commissioning Strategy

The strategy will support the Five Children's Commissioning Rights which aims to ensure that we provide children, young people and their families with:



The service components in scope of the S&H Strategy have a total funding allocation of £54.46m (16/17 year-end budget) and are broken down as follows:

- Child Protection (£22.97m) – delivered largely through locality Social Work teams, the primary focus is to ensure the most vulnerable children in Lincolnshire are protected from harm. Services outsourced via contract include the Return Interview Service focused on supporting children and young people who have run away or gone missing from home or care upon their return. The budget also includes the costs of Legal services, Independent Chairs, Team-Around-the-Child central co-ordinating team, Children's Services Customer Service Centre contact team, Lincolnshire Safeguarding Children Board, central Audit and Learning & Development teams. It also includes income and expenditure related to 'Partners in Practice' (£1.5m), and central support services (£4.13m), including Senior Management within Children's Services and strategic services such as Commissioning and Performance.
- Targeted Support/ Early Help (£6.94m) – delivered largely through locality Early Help teams, the primary focus is to encourage early intervention to promote the welfare of children, providing support as soon as problems emerge. This budget also includes net income (-£1.83m) from the Department for Communities and Local Government (DCLG) Troubled Families scheme which, again, is predominantly delivered by Early Help teams. Family Group Conferencing services (£0.28m) are also within this budget as is outsourced provision (£0.08m) to support children and families on the cusp of care.
- Looked After Children Services (£23.73m) consisting of:
 - Fostering & Adoption Services (£13.05m) – the majority of the budget covers the costs of fostering provision (including Special Guardianship Orders [SGOs], Regulation 24 placements with family and friends, remand services and 'Staying Put' provision) both from the in-house service and contracted Independent Fostering Agencies (IFAs), foster carer recruitment, adoption allowances, staffing costs for Fostering and Adoption services, and legal services. Contracted services include adoption support services for Birth Family Counselling (£0.05m) and 'Safe Base' (£0.05m).

- Residential Children's Homes (£7.17m) – the budget is fairly evenly split between the costs of contracted independent sector Residential Children's Homes placements and in-house provision across four homes and two short breaks units for Children with Disabilities.
 - Intense Needs Supported Accommodation (INSA) (£2.0m which forms part of Child Protection budget) – this provision is spot-purchased within the independent and voluntary/community sector and provides accommodation and support to those young people with highly complex, multiple needs. There is significant correlation with the supported accommodation provision covered within the Readiness for Adult Life (RfAL) Strategy and the desired outcomes for such young people are equally relevant to both strategies.
 - Unaccompanied Asylum Seeking Children (UASC) (£0.0m) – delivered largely through spot-purchased provision with IFAs and supported accommodation in the independent sector, together with support from LAC Social Work teams and the Lincolnshire Leaving Care Service (which sits under the RfAL Strategy), the focus is to support UASC whilst they are LAC and into Care Leaver status. Direct and indirect expenditure is c. £0.5m and is met via Home Office grants.
 - The LAC workforce (£3.51m) support LAC through geographic (North and South) Social Work teams.
- Children and Adolescent Mental Health Services (CAMHS) (£0.82m) – the budget is wholly constituted of LCC's contribution to CAMHS and a contracted online counselling service. CAMHS is a jointly commissioned service, in partnership with Lincolnshire CCGs, with Children's Services acting as Lead Commissioner. The pooled fund for 16/17 (£7.4m) is made up mainly via contributions from CCGs (£6.60m).

Finally, services and expenditure relating to School Nursing (£2.63m) and Health Visiting (£9.05m) are nominally included within the overall financial envelope of S&H, taking the overall budget to £66.14m. However, formal reporting relationships are within the Readiness for School commissioning strategy, and although there is significant correlation with the desired outcomes for children in receipt of such services within the S&H strategy, the budget is not included in the total of £54.46m indicated above.

4. Where We Are Now

A detailed analysis of the performance of existing services supporting this strategy can be found within the Performance Metrics document at Appendix A. The following extracts identify the prominent measures and performance information supporting this commissioning outcome.

Lincolnshire County Council received an Ofsted inspection in 2014. The single inspection of "Children's Services and review of the LSCB" returned the following findings:

Children who need help and protection	"Good"
Children looked after and achieving permanence	"Good"
Experiences and progress of care leavers	"Good"
Adoption Performance	"Outstanding"
Overall Performance	"Good"

These findings put Lincolnshire in line with the majority of other Local Authorities in the East Midlands. Overall, however, the national trend shows a significant number of LA's (51%) are performing at a rate of "Requires Improvement".

The table below shows the 2016/17 targets for S&H within the Council Business Plan.

Measures Measures are how we will monitor and report progress in achieving the outcome.	Annual Target April 16 – March 2017 (unless stated)	Actual Performance and Tolerance/Target 31 March 2017 (unless stated)
Looked After Children per 10,000 population aged under 18 (Plan is best*)	656 children or 45 per 10,000 population (under 18)	Actual: 684 children – 48.1 per 10,000 population U-18 Tolerance: 626-686 children – 43 - 47 per 10,000 population U-18
Children who are subject to a Child Protection Plan (Plan is best*)	340 children or 24 per 10,000 population under 18	Actual: 374 children – 26.3 per 10,000 population U-18 Tolerance: 310-370 children – 21 - 25 per 10,000 population U-18
Average time taken to move a child from care to an adoptive family (Lower number of days is better)	430 days	Actual: 379 days Tolerance: 430 - 520 days
Average time taken to match a child to an adoptive family (Lower number of days is better)	200 days	Actual: 174 days Tolerance: 190 - 210 days

* Indicates the planned target and/or tolerance levels are 'best' in terms of performance

In addition to the Council Business Plan, there are a number of Children's Services key performance measures for the directorate. The figures below show performance against targets for Q4 (unless otherwise stated) in 2016/17:

- Fostering/adoption of LAC aged 10 to <16 years old
 - Q4 Target: 88%

- Q4 Actual Performance: 88.3%
- Stability of placements of LAC: Number of moves (3 or more placements)
 - Q4 Target: 8%
 - Q4 Actual Performance: 2.9%
- Stability of placements of looked after children: length of placement (2 years or more)
 - Q4 Target: 68%
 - Q4 Actual Performance: 73.8%
- Looked after children cases which were reviewed within required timescales
 - Q2 Target: 100%
 - Q2 Actual Performance: 100%
- Participation of LAC in reviews
 - Q2 Target: 100%
 - Q2 Actual Performance: 99.6%
- Percentage of Looked after children with an up to date health check
 - Q4 Target: 98%
 - Q4 Actual Performance: 96.2%
- Percentage of Looked after children with an up to date dental check
 - Q4 Target: 98%
 - Q4 Actual Performance: 98.5%
- Percentage of Looked after children with an up to date routine immunisations
 - Q4 Target: 98%
 - Q4 Actual Performance: 95.0%
- Child Protection Plans lasting 2 or more years
 - Q2 Target: 2%
 - Q2 Actual Performance: 1.9%
- Children becoming the subject of a Child Protection Plan for a second or subsequent time
 - Q2 Target: 13%
 - Q2 Actual Performance: 13.6%
- Percentage of Social Care Referrals that are re-referrals
 - Q2 Target: 18%
 - Q2 Actual Performance: 17.6%
- Percentage of child protection cases which were reviewed in required timescales
 - Q2 Target: 100%
 - Q2 Actual Performance: 100%
- Percentage of privately fostered children visited within required timescale
 - Q2 Target: 90%
 - Q2 Actual Performance: 90.9%
- Percentage of assessments completed within timescale
 - Q4 Target: 92%
 - Q4 Actual Performance: Not available

- Vacancy Rate of Social Workers
 - Q4 Target: 14%
 - Q4 Actual Performance: Not available
- Percentage of families of children with disabilities using direct payments
 - Q4 Target: 50%
 - Q4 Actual Performance: 42.0%

The overwhelming majority of targets are being met, exceeded or within tolerance with only minor improvements required to improve performance to target levels.

Child Protection

Child Protection & Children in Need

Safeguarding is the fundamental priority of Children's Services, the golden thread underpinning all activity. Child protection – from contact and referral to assessment and support – is therefore an essential element of the Children's Services budget.

Contact for child protection concerns is primarily through the Council's Customer Service Centre operated by Serco. The Children's Services team includes qualified social workers to help screen contacts and ensure referrals are only allocated to Social Care where appropriate i.e. the criteria are met under sections 17 (Child in Need [CIN]) or 47 (Child Protection [CP]) of the Children Act 1989.

Assessment and support (where applicable) for s17 and s47 cases are predominantly undertaken by Social Workers based in locality teams. Independent Chairs oversee Child Protection Conferences that come together to consider any concerns about risks to the safety of a child and whether a child protection plan is needed to keep the child safe.

Between March 2013 and March 2016 there has been consistent growth in both CIN (15%) and CP (9%) cases in Lincolnshire, albeit the latter masks a reduction of nearly 20% against the figure in March 2015. Comparatively, Lincolnshire performs well against national, statistical neighbour and regional (East Midlands) local authorities although the rate of increase in Lincolnshire is steadily eroding the differential. Equally, data for the length of duration (<3 months; and 3-6 months) of CIN cases shows Lincolnshire performing above national, statistical neighbour and regional authorities but at a lower rate of improvement in the period from 2010 to 2015. See Appendix A for more information.

Lincolnshire Safeguarding Children Board

The Lincolnshire Safeguarding Children Board (LSCB) is a statutory multi-agency board made up of representatives from the Local Authority, Police, Health Service, Probation Trust, Youth Offending Service, the Voluntary Sector and others.

The LSCB vision is that every child and young person in Lincolnshire is safeguarded via the provision of accessible, timely, co-ordinated, high quality multi-agency services to children, young people and families. The 2016-2018 priorities for the LSCB are:

- Child sexual exploitation and emerging themes of abuse
- Enhancing the emotional wellbeing of children
- Promoting healthy relationships
- Working innovatively with children to reduce risk taking behaviours

Partners in Practice

Lincolnshire Children's Services has been selected by the Department for Education as a 'Partner in Practice' which aims to put genuine partnership between local and national government at the heart of work to improve services. Our work streams and aspirations will improve practice in Lincolnshire, transforming the quality of children's social care services and early help arrangements, and supporting the reform of the wider system. Practice excellence, and achieving more for the children we serve, is at the heart of the work we do. The Partners in Practice programme is structured around three work streams:

1. Practice and systems: creating the right environment for excellent practice and innovation to flourish, reducing bureaucracy, whilst creating a culture which prioritises excellent practice, based around the principles of innovation and excellence.
2. Governance and accountability: developing innovative new organisational models with the potential to radically improve services.
3. People and leadership: bringing the best people into the profession, and giving them the right knowledge and skills for the incredibly challenging but hugely rewarding work we expect them to do, and developing leaders equipped to nurture practice excellence.

Missing Children

One of the few externally sourced services in this area is the Return Interview service for children and young people who have runaway or gone missing from home or care. This small (£0.08m expenditure) service is delivered by Barnardo's and engages with children to ascertain the reasons behind why they go missing; to where they may go; and with whom they may consort whilst missing. The information can then be shared with the team in the Children's Services SAFE Hub and partner agencies such as the Police to ensure vulnerable children are safeguarded and avoid harm such as child sexual exploitation.

Based on the May 2017 contract ratings, the service is rated as **Good**, in terms of overall performance against the specification, with a risk rating of **Amber** due to some of the difficulties associated with co-ordinating and attending close to 450 return interviews across a county of the size of Lincolnshire.

Targeted Support/ Early Help

Early Help

Early help means providing support as soon as a problem emerges, at any point in a child's life, from foundation through to teenage years. Providing early help is more effective in promoting the welfare of children than reacting later. Lincolnshire's early help offer puts the responsibility on all professionals to identify emerging problems and potential unmet needs for individual children and families, irrespective of whether they are providing services to children or adults.

The critical features of an effective early help offer are:

- a multi-disciplinary approach that brings a range of professional skills and expertise to bear through a "Team Around The Child" (TAC) approach
- a relationship with a trusted Lead Professional who can engage the child and their family, and coordinate the support needed from other agencies
- practice that empowers families and helps them to develop the capacity to resolve their own problems
- a holistic approach that addresses children's needs in the wider family context
- simple, streamlined referral and assessment processes.

Of the 6,923 Early Help cases in the last 12 months, just under half (3,447) involved Social Care, nearly nine-tenths (3,060) of which were referred for reasons of 'Abuse/Neglect'. Despite the introduction of Early Help, re-referral rates to Social Care have remained fairly constant (between 17-20%) over the period March 2012 – September 2016. However, performance data shows an increase in numbers stepping down from Social Care to Early Help, indicating that the provision of Early Help supports Social Care in working more effectively, targeting the families who need higher levels of intervention and support whilst enabling those families on the periphery on Social Care to retain the advice and guidance offered by Early Help.

Statutory returns of section 251 data show local authorities' expenditure on Children's Services across different areas e.g. Social Care, Children's Centres etc. By comparison to other local authorities, Lincolnshire invests more in Safeguarding, Early Help and Family Support services whilst displaying significantly lower costs in terms of LAC expenditure; however, the high level of in-house provision within LAC services (see below) – which are, traditionally, less expensive than independent sector provision - complicates determining whether the relationship is one of correlation or causation.

Team Around the Child (TAC)

TAC is a process which brings together different agencies into one meeting where there are concerns about a child or a family to source support services and agree an Action Plan for implementation. Data across a three year period (March 2013-2016) shows a significant upwards growth (100%) in the number of TAC cases within Early Help. TAC cases may or may not involve Social Care and the Lead Professional can be from a number of agencies including statutory (Police, Education, Health etc.) and non-statutory (voluntary sector, provider etc.) partners not just LCC; indeed, around one-third of cases do not have an LCC employee as Lead Professional.

Troubled Families

Lincolnshire's response to the DCLG's Troubled Families programme has now been fully subsumed into Early Help locality working. The programme targets working with families where children or adults may have been involved in repeated criminal offending and/or where children are regularly absent from education and/or where adult worklessness exists in the household. Lincolnshire's response is multi-agency and includes secondees from the Police and District Councils as well as co-located DWP Employment Advisors to support families where worklessness exists.

Family Group Conferencing

Targeted support to deliver Early Help also exists in the form of the Family Group Conference (FGC) service. A Family Group Conference is a decision making meeting in which a child's wider family network come together to make a plan about the future arrangements for the child. The plan will ensure that the child is safe and his/her wellbeing is promoted.

Family Group Conferences are intended as a respectful and empowering process in which parents, children and members of the wider family or friends are given clear information about the concerns and are asked to work with a FGC Practitioner to produce a plan that addresses those concerns and answers specific queries. Whilst normally consensual, a FGC is an expected requirement of any child's Social Care Plan. The FGC team help to contribute positively to KPIs such as the stability of placements; the number of children on a CP plan for more than two occasions; and children returning to family post-LAC status as they are rehabilitated home thereby reducing the numbers of LAC.

Safe Families for Children

Safe Families for Children are the provider of an outsourced service (£0.08m) offering support to struggling families with a child under 12 years of age and providing 'edge of care' support as an alternative to short-stay foster care. The early intervention approach is designed to stabilise families at a time of crisis, preventing the escalation of need, lowering the risk of child abuse and neglect, and reducing the number of children taken into care.

Based on the May 17 contract ratings, the service is rated as **Good**, with a risk rating of **Green**, collectively identifying that the provision is successful and that there are no specific concerns. The service worked with over 50 families in 2016/17 with half of those de-escalating in terms of need and only one family escalating.

Looked After Children

The number of Lincolnshire LAC at the end of March 2016 was 667, 33% more than the 500 LAC at the end of March 2012. This equated to 48.1 LAC per 10,000 children under the age of 18 years in Lincolnshire. Although this compares favourably against averages for other local authorities at all levels – national (60 per 10,000); statistical neighbour (53 per 10,000); and regional (54 per 10,000) – the rate of increase of LAC per 10,000 in Lincolnshire has gone up by 22% in the five years between 2012 and 2016 compared to just 2% nationally, 4% amongst statistical neighbours, and 8% regionally. In addition, it should be noted that Lincolnshire, as a geographical entity, has a large population of LAC – around 550 - placed by other Local Authorities within its borders, around half of whom are over 14 years of age.

In terms of the overall cohort of Lincolnshire LAC, around one-third is aged 5-9 years and a similar fraction is aged 16-18 years. Around half of LAC that come into care is as a result of 'Neglect' with around one-fifth as a result of 'Physical harm'. See Appendix A for more detail.

LAC are likely therefore to have experienced trauma in their lives and are at high risk of social exclusion, health inequalities, and poor educational attainment. Although many LAC do well across all of these areas, there is significant evidence that, as a whole, they do less well than their peers. LAC also show significantly higher rates of mental health issues, emotional disorders such as anxiety and depression, and hyperactivity and autistic spectrum disorder conditions.

LAC and care leavers are between four and five times more likely to self-harm in adulthood. They are at five-fold increased risk of all childhood mental health, emotional and behavioural problems, and looked after teenage girls are more than twice as likely to become pregnant than other teenagers.

LAC services are focused on four main areas of work: Fostering and Adoption services; Residential Children's Homes; INSA; and UASC.

Fostering and Adoption Services

At over 80% of LAC, Lincolnshire has one of the highest in-house fostering compositions of local authorities in the country (second amongst the 47 Local Authorities participating in the CIPFA LAC Benchmarking Club 2016). In addition to the recruitment of foster carers, in-house fostering includes arrangements such as Informal Kinship Care, Private Fostering and, particularly, formal Kinship Foster Care which has risen nearly four-fold between 2012 and 2016; meanwhile, mechanisms such as Special Guardianship Orders (SGOs) that promise greater permanency than fostering have risen more than five-fold between 2010 and 2015.

Independent sector foster care placements have remained steady since 2014/15, although the numbers of UASC (see below) aged below 16 years of age placed into Independent

Foster Care Agencies (IFAs) has steadily increased as a proportion of those numbers from 16% (2) in 2012 to 54% (14) in 2017.

Given in-house foster care is, on average, less than half the price of independent sector provision, Lincolnshire is able to achieve value for money due to the high composition of LAC within in-house services, and it is vital for the financial sustainability of the LAC service that there are sufficient in-house Foster Carers.

Adoption services were rated as 'Outstanding' at the Ofsted inspection of LCC Children's Services in 2014. Targets in the Council Plan to match children in care to an adoptive family and to move in with their adoptive family from the point of entering care are both performing above target. Adoption support services for Counselling for Birth Families and 'Safe Base' (a 'branded' programme to support adoptive parents to help promote attachment with the adopted child) – both commissioned from After Adoption – are rated as **Good**, with a risk rating of **Green**, as of January 2017, collectively identifying that the provision is successful and that there are no specific concerns.

Residential Homes

The four Lincolnshire Residential Children's Homes are rated at the least as "Good" with the Homes in Sleaford and Gainsborough achieving "Outstanding" ratings. There are two Lincolnshire Short Breaks Children's Care Homes, one rated "Outstanding" and the second rated "Good." The Lincolnshire Secure Unit is also rated as "Good."

The four in-house permanent Residential Children's Homes have traditionally been occupied close to capacity throughout the year. However, during 2016/17 numbers declined in Spalding to an average of 3 residents for the 7-unit facility. As a result, the in-house cost for Residential Children's Homes in Lincolnshire in 2016/17 was higher than under normal circumstances.

Lincolnshire also places children and young people within Independent Sector Residential Children's Homes (IRH) provision. These tend to be the most complex and difficult to place children and young people. The average cost of IRH provision is £4,000 per child per week, around 40% more expensive in comparison to the average cost of in-house provision (£2,800 per child per week). As the level of complexity of some children and young people grows, together with the growth in the number of LAC, so overall costs are inexorably rising due to the higher costs associated with IRH provision.

At fewer than 6% of LAC, Lincolnshire is one of the lowest-placing authorities of children and young people in IRH provision participating in the LAC CIPFA Benchmarking Club (see Appendix A). However, the number of Lincolnshire children and young people in IRH provision has seen a three-fold increase from nine to twenty-seven over the last five years.

Intense Needs Supported Accommodation (INSA)

INSA supports those young people with complex and multiple needs that are at risk of homelessness. This cohort presents challenges that are beyond the capacities of the commissioned low-level supported accommodation service.

Many of the children and young people within this cohort are previously known to Children's Services with as many as a third stepping down from Residential Children's Homes, a quarter from Fostering services and one-in-seven through the Youth Justice route. The majority of the remainder present as homeless 16-17 year olds.

The numbers accessing INSA are growing with associated expenditure increasing by nearly 140% in two years from £0.73m in 14/15 to £1.73m in 16/17 (see Appendix A) with projections for 17/18 well in excess of £2.0m. Moreover, length of stay in such provision

seems to be extending with the average stay for those who have left (as of 30 September 2016) being around 37 weeks with the cohort remaining in situ at that time moving towards an average of 50 weeks.

Unaccompanied Asylum Seeking Children (UASC)

The number of UASC accruing LAC (and, where eligible, subsequently Leaving Care) status in Lincolnshire has increased more than five-fold between 2011/12 to 2015/16 to 43 children and young people.

Those under 16 years of age are generally placed into IFA provision with fifteen UASC in such provision as of March 2017. The same numbers of 16-17 year olds are in low-level supported accommodation outsourced to a provider delivering the service in Peterborough. In addition, there are 37 UASC aged over 18 years with the same provider receiving low level supported accommodation whilst accessing a Leaving Care service from the commissioned provider Barnardo's. Funding from the Home Office covers the cost of UASC provision, including those accessing a Leaving Care service.

Mental Health

Children and Adolescent Mental Health Services (CAMHS)

All children and young people can access universal services such as GPs, child and young people Nurses and Education settings etc. which may be able to provide some initial universal support or signposting for emotional need support. CAMHS provides highly specialist mental health support which is delivered by clinical experts from within the contracted service provider. CAMHS is available for all Children and Young People in Lincolnshire from birth to the age of 18 years (or 25 years of age for those accessing leaving care services), with referral criteria that service users need to meet to ensure that treatment is provided appropriately and when it is in the best interest of the service user.

CAMHS provides screening, assessment, and both short and medium term intervention, stabilisation and resolution for a range of newly emerging or low severity mental health problems in children and young people and on-going treatment and management of more severe, long term and/or complex mental health conditions. The types of support CAMHS offers includes diagnosis and treatment for depression, anxiety, eating disorders, psychosis, PTSD and trauma, self-harm, bereavement, harmful sexualised behaviour etc.

The total number of referrals received into the service during 2015/16 was 4,427, 142 (3%) lower than previous year. The overall percentage of cases declined over the 12 month period was 18%. In terms of referrals by source, GPs are the highest referrers (2,537 or 57.3%) for 2015/16 followed by other medical sources (1,316 or 29.7%) such as Nurses, Community Paediatrics etc. and Schools (262 or 5.9%). See Appendix A for more details.

For 2015/2016 the highest factor for referrals to Primary CAMHS services was Anxiety (472 referrals) followed by Low Mood (302 referrals) and Self-Harm (128 referrals). There is a very similar picture in Tier 3 CAMHS with the highest number of referrals for Anxiety (929) Low Mood (748) and Self-Harm (472) but a much higher number of referrals for Behaviour Problems with 551 referrals at Tier 3 (compared to 62 referrals for Primary).

97% of patients receiving Tier 3 services were seen within the 12 week target in 2015/16 whilst average waiting time for Primary CAMHS services was in line with the 6 week target. 77% of LAC were seen within the 4 week target for the cohort with the average waiting time being below 3 weeks. In comparison to the national wait target (from referral to intervention) of 18 weeks, Lincolnshire's average for the majority of targets was within 6 weeks.

Satisfaction surveys within the service show children and young people gave scores above 89% - for being 'listened to', 'treated well', 'taken seriously' and 'providing a good service' – against a target of 95%. The score was 91% for parents of children and young people.

A new model of service was introduced in April 2016, linked to the recommendations of the Future in Mind report and associated Transformation Fund monies, following the involvement of over 55 stakeholder groups. CAMHS is now delivered through a single point of access and includes a specific service relating to Eating Disorders.

Outside of the 'core' CAMHS (an integrated provision delivering care through a number of evidenced based pathways related to depression, anxiety, PTSD and trauma, self-harm etc. offering a wide range of interventions, including access to self-help and group interventions) there are additional areas of support e.g. to young people with a learning disability, to those in transition to adult care, Targeted Early Access to Mental Health support (TEAMHS) which supports universal services and includes a professional advice line, consultation clinics, training programmes, self-help materials and a local directory of CAMHS and other related services.

Another key area of development within the new model is the Crisis and Home Treatment Service (C&HTS) which aims to provide a specialist CAMHS intensive community based outreach model of service for children, young people and families whose high levels of complex needs cannot be met by the existing integrated core CAMHS usually due to risk and /or severity of mental illness. C&HTS offers a high intensity, time limited programme of intervention, linked to existing care plans, without duplication of services and is available seven days a week, 365 days per year. Introduced in April 2016, the C&HTS has achieved a score of 90% (against a target of 95%) for emergency telephone responses within 4 hours and 97.6% for the delivery of a face-to-face appointment within 24 hours against the same target of 95%.

Overall, as of June 2017, whilst the risk rating is **Green**, the performance of the CAMHS contract by the contracted provider is rated as **'Requires Improvement'** due to specific areas of the contract not meeting agreed KPIs including wait times, referral pathways and user engagement.

Online Counselling

Under the Mental Health umbrella of services there is also outsourced provision via contract (£0.2m) of an online counselling service, www.Kooth.com, delivered by a contracted provider. This gives Lincolnshire young people (aged 11-25 years) access to a 24/7 online counselling service that offers direct counselling with a qualified therapist (delivered in chat sessions, or via messages), self-help articles and documents on a wide range of different topics and community support with peer-to-peer interaction delivered via podcasts, journals, forums and magazines.

Kooth helps young people with a wide range of low level emotional wellbeing needs, engaging with young people at the earliest opportunity to prevent needs from escalating. The predominant needs of service users in Lincolnshire include anxiety, depression, self-harm, loneliness, family relationships and self-worth, and are very much aligned with the needs identified in other areas.

Since the service started in Lincolnshire, over 5,000 young people have registered. The service is able to evidence excellent feedback from users, with a consistent average satisfaction score of 4.5/5. Based on the June 2017 contract ratings, the service is rated as **Good**, with a risk rating of **Green**, collectively identifying that the provision is successful and that there are no specific concerns.

Emotional Wellbeing Service (EWS)

A new outsourced Emotional Wellbeing Service will commence on 1 October 2017, delivered by the same contracted supplier who deliver CAMHS, to complement the services described above. The proposed annual expenditure of £2.0m is not included in the budget figures in Section 3. The new service will provide direct interventions to school-aged Lincolnshire children and young people, and their families, who are experiencing emotional wellbeing concerns, which do not meet the thresholds for other services, e.g. CAMHS. Direct interventions will include one to one support and group work, providing early intervention to prevent needs from escalating.

The service will also offer support to schools to build resilience and to upskill school-based staff to enable them to become more confident in meeting the emotional wellbeing needs of their pupils. The service will be designed to meet gaps in current provision in Lincolnshire and will refer/signpost to other services when required, as well as support children and young people in gaining confidence in accessing services.

5. Cross-Cutting Considerations

5.1. Other Commissioning Strategies

There are a number of inter-dependencies between the Safe & Healthy Commissioning Strategy and other Commissioning Strategies within the Council.

Readiness for Adult Life (RfAL) - This commissioning strategy aims to ensure all young people should have an equal opportunity to do well, to lead happy and fulfilled lives and make their own choices to shape the direction of their own lives. The growth in INSA placements has a clear correlation with the Supported Accommodation service and how each can be commissioned in the future to support this cohort of young people, facilitate step-up/ step-down provision and prevent escalation of need.

Children's mental health services that feature within the S&H strategy, and how young people transition into adult mental health, also has implications for the RfAL strategy.

Learn and Achieve - This commissioning strategy aims to ensure all children and young people will learn and achieve, enabling them to reach their potential. There is considerable affinity between the two strategies particularly with regard to the correlation of young people remaining safe and (mentally) healthy in order to succeed in terms of educational achievement and in relation to outcomes for LAC who traditionally underperform in terms of educational qualifications against their peers.

Readiness for School – This commissioning strategy aims to commit agencies to work together to help shape the early years of all children in Lincolnshire, contributing to a wide range of outcomes during this formative stage and ensure they are ready for school. There are clear parallels between the aims of the two strategies particularly with regard to achieving outcomes for LAC, including UASC who may not have English as a first language, to give them the best start in life.

Adult Specialities - This commissioning strategy aims to improve outcomes for adults with mental health, learning disabilities and/or autism. There is a key link within this strategy to children and young people mental health services and the potential requirement for young people to make the transition to Adult Mental Health services, especially LAC who are more likely to experience poor mental health, often as a direct result of trauma. Mental Health services across Children's and Adult services are currently commissioned through an agreement with Lincolnshire NHS Partnership Foundation Trust (LPFT). There are clear, established pathways for C&YP to provide the appropriate care and support through transition to adult services where needed.

Equally for those LAC with disabilities, before the young person turns 18 a Transition Assessment must be carried out if it is considered that the young person is likely to have care and support needs when they turn 18. Not all young people who have care and support needs will be known to Children's Services but may have support needs when they turn 18.

Transition Assessments need to be carried out early enough so that the right care and support is in place should the young person move in to Adult Care and to enable this service to plan its own commissioning strategy to be able to meet emerging needs.

Safeguarding Adults - The purpose of this commissioning strategy is that vulnerable adults' rights are protected so that everyone can live safely and free from abuse and neglect. There are obvious synergies with the S&H Strategy which aims to replicate the vision for children and young people.

Adult frailty, long term conditions and physical disability – The Strategy focuses on supporting people to live in their own homes for as long as they wish by developing high quality, personalised services that are flexible, responsive and give people choice and control over how their care and support is provided. There is some resonance with the S&H Strategy in that there are a number of children with a disability who are also LAC and who will require a Transition Assessment, before the young person turns 18.

Carers - This commissioning strategy aims to ensure that carers feel respected and are able to balance their caring roles and maintain their quality of life. This is a joint strategy for all young and adult carers and aims to ensure that carers look after their own health as well as being able to keep the person they look after safe, linking directly to the S&H strategy.

Enablers and support to the Council's outcomes - This commissioning strategy includes the enablers required to support the delivery of the Council's agreed outcomes, such as ICT, Property, People Strategy, Commissioning and Strategic communication. One key area of synergy in particular is the relationship between Information Governance, covered in this strategy, and ensuring the safety of LAC, covered within the S&H Strategy.

How we do our business - This commissioning strategy includes the overarching governance and standards for the Council, including decision making through the democratic process.

Protecting the Public - This commissioning strategy covers all of the work required in order to protect the communities in Lincolnshire. Activities and outcomes within the S&H strategy supports priorities such as preventing and reducing crime and reducing anti-social behaviour.

Wellbeing - This commissioning strategy aims to assist improvements in the health and wellbeing of the population as a whole; it covers advice, information and preventative services. There are inter-dependencies with the S&H strategy with regards to effective health advice and support, particularly with regard to mental health and access to health services for LAC, supported housing and the treatment of substance misuse.

5.2. Council Service Areas

Beyond Children's Services, there are key dependencies for this strategy in meeting the needs and outcomes with other service areas across the organisation.

Adult Care and Community Wellbeing – Specifically concerning the support provided following the transition of young people with SEND and young people with mental health problems into the specialist adult services and physical disability teams, supporting those with learning and physical disabilities, and poor mental health. The carers service is also pivotal at a strategic level in supporting the needs of young and young adult carers, helping them to remain healthy particularly during any transition to Adult services.

Public health functions are a key enabler in young people, particularly for LAC where the Council acts as Corporate Parent, staying safe and healthy through, for example, the support provided with housing, health services and healthy lifestyles.

Environment and Economy – this strategy can positively affect areas such as economic growth in having young people with the resilience and mental health wellbeing for employability in the local economy.

Resources/ Communities – this strategy can positively affect areas such as public protection in terms of the prevention and reduction of crime, including fires and their consequences, and anti-social behaviour.

5.3. Joint Strategic Needs Analysis (JSNA)

The JSNA is a shared evidence base made up of commentaries and data sources which reports on the key areas of health and wellbeing in Lincolnshire. Each topic area assesses the current picture in Lincolnshire, existing services and looks ahead to potential future level of need to support effective service planning and commissioning. The following topics have been considered as part of this strategy:

- Education Attainment: Foundation & Key Stage 4 – having a specific focus on enabling educational achievement of Lincolnshire Children by, first and foremost, keeping them safe and supporting them to be healthy, including developing resilience. With particular regard to LAC, the priority will be on the achievement gap between LAC and their peers throughout their education.
- Looked After Children – considering how to reduce the numbers of LAC through preventative services, ensure LAC fulfil their potential by enhancing placement stability and wrap-around support, including from Corporate Parenting partner organisations, and delivering sufficiency of accommodation with provision in Lincolnshire.
- Mental Health & Emotional Wellbeing – understanding the impact this has on children and young people, including vulnerable groups such as LAC, and developing responses to improve their mental health and emotional wellbeing.
- Mental Health (Adults) – developing pathways to ensure the smooth transition of children and young people with mental health issues into Adult services.
- Suicide – particularly understanding and helping LAC who self-harm through building up resilience to better maintain good emotional health and wellbeing, and understanding the role of elements such as social media in youth suicides and self-harm.
- Special Educational Needs and Disability – focusing on ensuring that children with a disability have the right support to stay safe and remain as healthy as they can be.
- Teenage Pregnancy – focusing on keeping young people safe within the context of healthy relationships and having aspirations for the future, as well as positive sexual health.
- Carers – linking in with the Joint Carers Strategy and Commissioning Strategy to help Young Carers remain healthy and the children and young people being cared for to stay safe.
- Housing & Health – focusing on helping children and young people to grow up in a family environment, wherever it is safe to do so, and ensuring the sufficiency of accommodation with support.

5.4. Additional Considerations

In addition to other Council service areas, strategic partners such as Lincolnshire Schools, Health providers, Police and District councils are critical in their contribution to young people staying safe and healthy. Appropriate educational, social and emotional skills developed whilst at school are central to children and young people's wellbeing and in fostering resilience.

District Councils have a key role to play in supporting the housing needs of young people who are homeless or are at risk of being homeless, and Lincolnshire LAC as part of the county's overall Corporate Parenting role. The Council works closely with Districts as part of the delivery board overseeing the Lincolnshire Youth Housing Strategy, which seeks to bring key partners and stakeholders together to create coordinated and joined up services across Lincolnshire for young people, including LAC, who experience difficulties with housing. All partners across Lincolnshire are committed to ensuring that all young people experiencing difficulties with housing receive the help and support that they need to stay safe and healthy. The strategy considers the whole youth housing pathway and identifies opportunities for effective service delivery right from areas of early intervention and education through to independence and the support to succeed.

Health providers are pivotal to supporting children and young people to stay safe and maintain their health and wellbeing. Children's Services work closely with primary health care partners to ensure essential services such as health and dental checks are delivered for LAC with regular updates to the Corporate Parenting Sub-Group. Engagement with health care practitioners and more specialist health provision helps to identify and support children and young people with mental health problems.

In the development of future Commissioning Plans to enable this strategy to succeed, it will be essential to ensure that a number of additional statutory elements are considered, including: the Social Value Act, Section 11 (safeguarding) of the Children's Act, Section 17 Crime & Disorder Act, Information Governance, Equality & Diversity and, Business Continuity & Resilience.

6. Summary of Analysis Findings

6.1. Analyses Undertaken

The following analysis activities have been carried out:

- Political priorities / risks – through engagement with the Executive portfolio holder as part of Executive Directorate Management Team meetings (DMT) along with desktop analysis (see Appendix B).
- Demographic and stakeholder engagement feedback – various engagement activities are undertaken in relation to the specific commissioned services set out in this strategy. An overview can be found in Appendix B.
- Legal framework, national and local policy and guidance – a desktop analysis has been undertaken as set out in Appendix B.
- Current performance – analysis has been produced within Appendix A.
- Available resources now and in the foreseeable future – a financial summary, including identified pressures and saving requirements can be found in Appendix A.
- Market offers (external / internal) – an overview of the marketplace is available in Appendix B.

6.2. Interpretation of Analysis

We interpreted the above analyses to identify emerging issues and other factors that we need to take into account for this Commissioning Strategy - a summary of this interpretation is detailed below utilising a Signs of Safety approach.

What is working well?	What are we worried about?
<ul style="list-style-type: none"> • Ofsted rating 'Good' in 2015 with Adoption Performance receiving a rating of 'Outstanding' • CQC Rating of 'Outstanding' for CAMHS • Substantial investment in Foster Care Recruitment Team to enhance recruitment and retention • Lincolnshire has one of the highest compositions of in-house Foster Carers within the CIPFA LAC benchmarking club • Value for Money in many areas e.g. Lincolnshire direct cost per LAC per week (£672) is significantly lower than the average (£882) • Cost of in-house foster care and residential children's homes provides significant value for money, especially in comparison to the independent marketplace • Current Performance Data evidences the following: 	<ul style="list-style-type: none"> • Overall lower spend per head of 0-17 population but spend per head differential is reducing in comparison to regional or national benchmarks • LAC numbers and LAC per 10,000 have significantly increased over the last 5 years in comparison to national and regional growth. • Consistent financial pressures within the LAC budget as a result of growth in numbers • Concern around the effective targeting of early prevention services that prevent escalation of need and stop children becoming LAC • Ability to recruit and retain foster carers in light of: <ul style="list-style-type: none"> ○ withdrawal due to ill-health or reaching retirement age ○ withdrawal due to feelings of isolation and/or lack of support ○ increased competition from independent sector ○ growing complexity of children requiring foster care

<ul style="list-style-type: none"> ○ Fostering and Adoption rates above target ○ Matching a child in care to adoptive family above target ○ Comparably lower rates of LAC per 10,000 year on year ○ Child Protection and LAC cases reviewed in timescales ○ High stability rates within LAC placements ○ Consistently lower spend ratio on Children's Social Care when compared against all comparators ● Extensive use of kinship care arrangements to ensure children and young people are able to reside with extended family ● Extensive use of Special Guardianship Orders to formalise care arrangements offering permanence and greater security ● Opportunity to re-shape services for LAC and Care Leavers in line with "Putting Children First" and "Keep on Caring" ● Impending investment in an Emotional Wellbeing service to support complex and emergent behaviours ● Waiting times for LAC for CAMHS is above target and compares favourably with services nationally ● Comprehensive re-design and implementation of a new service model for CAMHS that includes: <ul style="list-style-type: none"> ○ Professional Advice Line ○ A 24/7 countywide Crisis and Home Treatment Service ○ Countywide Eating Disorder Service ○ Consistently good feedback from patients and parents ○ "Lost Luggage" stakeholder engagement group ○ Targeted work designed to reduce mental health stigma ● Successful bids to NHS England for a further £1.5m funding per year for Mental Health services ● Collaboration with East Midlands and North East Lincolnshire on a Children and Young People's Improving Access to Psychological Therapies (IAPT) programme ● Joint working with CCG's and development of a Future In Mind Steering Group with multi-agency representation ● An online counselling service available 24/7 countywide 	<ul style="list-style-type: none"> ● Significant growth in the number of placements in (comparatively) expensive Independent Residential Children's Homes ● Lack of effective step-up/ step-down provision to enable transition of LAC from Residential Care to semi-independent living in a timely manner ● The growth in kinship care provision and SGOs requires increased resources from the LA compared to informal kinship care (although this remains more cost effective than foster care) ● Growth in kinship care arrangements and LAC for the 0-5 cohort queries targeting of preventative services ● There are increasing numbers of UASC coming into Lincolnshire ● Substantial growth in the number of the INSA cohort with associated significant increases in cost ● Growth of 'Neglect' (75%), 'Physical Harm' (117%) and 'Emotional Harm' (52%) as reasons for entry of children into care ● Strengthen performance management of Early Help service to target services effectively and validate the outcomes and deliverables being achieved by Early Help ● Concerns over LAC workforce recruitment and retention ● Increasing complexity of adolescents entering care may increase placement instability ● Financial pressures linked to the new strategies "Putting Children First" and "Keep on Caring" ● Concerns in embedding the new CAMHS model relating to the: <ul style="list-style-type: none"> ○ ongoing development of pathways, including the Behaviour Pathway ○ recruitment and retention of staff ○ sustainability of ambitious, stretch performance indicators ○ ability to evidence service users shaping of the service ○ strengthening of financial arrangements ● Ability to work effectively with Schools to raise awareness of mental health issues and train teaching staff on early signs of mental health ● Potential over-demand on both the online counselling service and Emotional Wellbeing service
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6.3. Conclusions from Interpretation

What are we going to do about it?

- Undertake a 'Deep Dive' of the current and recent LAC cohort to ensure children are transitioning to LAC status within appropriate thresholds and evaluate if more could be done, together with partner organisations, to avoid children becoming LAC
- Deliver the Partners in Practice programme to improve practice in Lincolnshire, transform the quality of Children's Social Care Services and Early Help arrangements, and support reform of the wider system within Children's Services
- Develop a local model of suitable and appropriate accommodation options that effectively manages the cohort of young people requiring accommodation with support and adopt a multiagency approach to target support to the right young people, at the right time, in order keep children safe in their families where appropriate to do so in order to reduce the overall LAC population
- Undertake a review of existing CAMHS commissioning arrangements, including the Future In Mind Strategy, to inform future intentions in partnership with other agencies
- Review the effectiveness of early intervention services including the development of a performance management programme to understand the quantifiable outcomes delivered by the service and the relationship to reducing the number of LAC
- Understand why Lincolnshire has a higher rate of growth of CIN than national, east midlands or statistical neighbour comparators and take corrective action
- Develop and monitor delivery of an Emotional Wellbeing Service providing direct intervention to school-aged Lincolnshire children and their families experiencing emotional wellbeing issues
- Undertake targeted marketing and recruitment campaigns to support the growth of the in-house Foster Care Market
- Improve support to in-house foster carers to increase retention rates and commence a rolling programme of learning from exit interviews
- Undertake targeted work to support the recruitment and retention of and the ongoing development of in-house Residential Children's Workers leading to the creation of a flexible support service that can meet the needs of all LAC including those with the most complex needs

7. Options for Final Outcomes and Future Delivery

Outcome 1: Children are safe and protected from harm	
Child Protection	
Safeguarding is the fundamental priority of Children's Services, the golden thread underpinning all activity. Child protection – from contact and referral to assessment and support – is therefore an essential element of the work of Children's Services.	
Service Delivery	Potential Risks
Contact services are provided through the Customer Service Centre with assessment and support services delivered by Social Workers in locality teams meeting the needs of children and families under s17 (Children in Need) and s47 (Child Protection) of the Children's Act 1989. Contracted out services include the Return Interview service, for those children who have runaway or gone missing from home or care Consideration will also need to be given to the RfAL Strategy (links to supported accommodation) as well as Safeguarding Adults, Adult Specialities and Adult Physical Disabilities (links to transition for CWD)	<ul style="list-style-type: none"> • Growing number of LAC and financial impact on Children's Services • Growing numbers of CIN, especially 0-5 cohort • Growing numbers and increasing complexity of young people becoming known to Children's Services at later stage in life • Insufficient provision available within the Lincolnshire marketplace for accommodation with support
Policy	Finance
<ul style="list-style-type: none"> • Children's Act 1989, especially Sections 17, 20, and 47 • Section 11 of the Children's Act 2004 • Children and Families Act 2014 • Care Act 2014 • LCC LAC Sufficiency Strategy 	Although there are no further identified savings targets allocated against this area, there are additional cost pressures as a result of the need for additional social care staffing to respond to the increasing number of referrals and complexity of cases of children in need and in care, and increase in demand for accommodation for homeless young people requiring intense needs support accommodation.

Outcome 2: Children and families are supported as soon as problems emerge	
Targeted Support and Early Help	
<p>Early help means providing support as soon as a problem emerges, at any point in a child's life, from foundation through to teenage years. Providing early help is more effective in promoting the welfare of children than reacting later. Lincolnshire's early help offer puts the responsibility on all professionals to identify emerging problems and potential unmet needs for individual children and families</p>	
Service Delivery	Potential Risks
<p>The service is delivered largely through locality Early Help teams; the primary focus is to encourage early intervention to promote the welfare of children, providing support as soon as problems emerge.</p> <p>Partner agencies are encouraged to play a significant role through the development of Early Help Assessments and the adoption of a 'Team Around the Child' approach, a multi-agency process designed to provide wrap-around support to children and families</p>	<ul style="list-style-type: none"> • The growing number of LAC and the CIN 0-5 cohort raises concern around the targeting and effectiveness of early prevention services • Difficulty in establishing a performance measurement and management system to quantify the outcomes and evidence the deliverables of the Early Help service • Potential impact of reconfiguration of 0-19 Health services on prevention and capacity of Early Help
Policy	Finance
<ul style="list-style-type: none"> • Children Act 1989 • Children Act 2004, especially section 10 • Children and Families Act 2014 • Early Help Offer 	<p>There are no further identified savings targets allocated against this area for 17/18 although £0.35m is expected as a result of the decommissioning of the Family Nurse Partnership service which will be covered under the Readiness for School Strategy. In addition, there are savings of £0.22m as a result of the integration of family support capacity implemented in 2016-17.</p> <p>More importantly for Early Help services is to be able to demonstrate how the service can help generate savings in other areas through prevention of escalation of need or entry of children into care</p>

Mental Health Services	
<p>All children and young people can access universal services such as GPs, child and young people Nurses and Education settings etc. which may be able to provide some initial universal support or signposting for emotional need support. CAMHS provides highly specialist mental health support and is available, with specific referral criteria, for all Children and Young People in Lincolnshire from birth to the age of 18 years (or 25 years of age for those accessing leaving care services)</p>	
Service Delivery	Potential Risks
<p>CAMHS is delivered by clinical experts from the contracted provider who also delivers Adult mental health services. The provider will also deliver the Emotional Wellbeing service currently in development to meet the lower mental health needs of children and young people. The online counselling service is due to be recommissioned shortly for provision from April 2018</p> <p>Consideration will also need to be given to the Wellbeing Strategy that aims to improve the health and wellbeing of the people of Lincolnshire and Adults Specialities Strategy and the links to young people transitioning to Adult mental health services</p>	<ul style="list-style-type: none"> • Potential over-demand on both the Emotional Wellbeing and online counselling services • Risks of implementing a new service – Emotional Wellbeing service – with no specific referral criteria and difficulties of ensuring stakeholders understand the differences between 'Mental Health' and 'Emotional Wellbeing' • Ability to train staff in partner agencies such as schools to identify the early signs of mental health problems
Policy	Finance
<ul style="list-style-type: none"> • Future in Mind 2016 • Mental Health Act 1983 • Mental Health Act 2007 • Improving Access to CAMHS 2009 	<p>There are no further identified savings targets allocated against this area for 17/18. Service delivery is boosted by additional funding from CCGs, NHS England (Future in Mind) for CAMHS, and partner agencies such as schools to match-fund the Emotional Wellbeing service.</p>

Outcome 3: Looked After Children feel supported and reach adulthood happy and healthy	
Looked After Children	
Looked After Children services are delivered to and support children and young people in care, fulfilling the Council's statutory obligations and role as Corporate Parent to LAC in Lincolnshire. Generally, outcomes for LAC are likely to be poorer when compared to their peers in terms of education, and health and wellbeing whilst they are more likely to be represented in the youth offending population, experience teenage pregnancy and be negatively impacted by homelessness.	
Service Delivery	Potential Risks
<p>Services include fostering, adoption, residential children's homes, INSA and supported accommodation for UASC. Provision is delivered from both in-house services – with dedicated Fostering and Adoption teams, and LCC Residential Children's Homes – alongside spot-purchased placements in the independent sector for Foster Care, Residential homes, INSA and supported accommodation for UASC.</p> <p>Consideration will also need to be given to RfAL Strategy (links to supported accommodation services and Care Leavers services), Learn and Achieve Strategy (educational outcomes for LAC), Readiness for School (best start in life for LAC, including UASC) and Wellbeing, Adult Specialities and Physical Disabilities strategies (links to supported accommodation services, young people with mental health problems in transition and transition of CWD respectively)</p>	<ul style="list-style-type: none"> • Growing numbers of LAC presents significant risk to LAC services budget and, consequently, departmental budget as a whole • Growing numbers and complexity of young people requiring INSA, and associated costs in terms of spot-purchasing of placements • Sufficiency of marketplace to meet demand in Lincolnshire and further afield • Inability to enhance and maintain in-house foster carer service likely to be financially disastrous given reliance on in-house service to keep costs low • Risk of failing to maintain high-occupancy rates at in-house Residential Children's Homes – potential double impact of increased in-house costs and increase in comparatively expensive independent sector placements
Policy	Finance
<ul style="list-style-type: none"> • Children's Act 1989, especially Sections 20 and 30 • Children's Act 2004 • Children and Families Act 2014 • Keep On Caring 2016 • LCC LAC Strategy • LCC Fostering Statement of Purpose • LCC Residential Children's Homes Statement of Purpose • LCC LAC Sufficiency Strategy 	There are no further identified savings targets allocated against this area; however, an increase in the numbers and complexities of children and young people coming into care is increasing demand for INSA services alongside additional cost pressures around growth, in line with national trends, in LAC placements and SGOs.

8. Future Strategy

Outcome 1: Children are safe and protected from harm			
What will we do?	When?	Who will do it?	Are there any risks?
Undertake a 'Deep Dive' of current and recent LAC cohort to ensure children are transitioning to LAC status within appropriate thresholds and evaluate if more could be done, together with partner organisations, to avoid children becoming LAC	December 2017	Assistant Director, Children's Services Children's Locality Service Manager	<ul style="list-style-type: none"> • Future funding requirement due to growth in LAC population • Impact on other areas of departmental budget
Deliver the Partners in Practice programme to improve practice in Lincolnshire, transform the quality of Children's Social Care Services and Early Help arrangements, and support reform of the wider system within Children's Services	April 2018	Assistant Director, Children's Services Service Manager – Partners in Practice Programme	<ul style="list-style-type: none"> • Ability to innovate and deliver reforms within legislative parameters • Sufficient level of resources to support under-performing other Local Authorities • Change management of existing services
Implement a LAC/Care Leavers programme board to develop a local model of suitable and appropriate accommodation options that effectively manages the cohort of young people requiring accommodation.	June 2017 (Board) July 2018 (model) July 2019 (commissioned services)	Assistant Director, Children's Services Children's Corporate Parenting Manager	<ul style="list-style-type: none"> • Lack of capacity/ resources of partners to support • Sufficiency of supplier market to provide effective services • Ability to source suitable accommodation • Increasing numbers and complexity of young people requiring support
Undertake a review of existing CAMHS commissioning arrangements, aligned to the Future In Mind Strategy, to inform future intentions in partnership with other agencies	April 2018	Assistant Director, Children's Services Children's Commissioning Service Manager	<ul style="list-style-type: none"> • Ability to recruit and retain staff • Sustainability of ambitious, stretch performance indicators
How will we measure these actions are improving this outcome?			Target:
Number of Looked after Children per 10,000 under 18s* (Plan is best)			48
Number of Children with a Child Protection Plan per 10,000 under 18 years old* (Plan is best)			24
Child Protection Plans lasting 2 or more years (Lower is better)			2%
Children becoming the subject of a Child Protection Plan for a second or subsequent time (Lower is better)			13%

Percentage of child protection cases which were reviewed in required timescales (Higher is better)	100%
Percentage of assessments completed within timescale (Higher is better)	92%
Vacancy Rate of Social Workers (Lower is better)	14%

Outcome 2: Children and families are supported as soon as problems emerge

What will we do?	When?	Who will do it?	Are there any risks?
Review the effectiveness of early intervention services including the development of a performance management programme to understand the quantifiable outcomes delivered by the service and to help reduce the need for statutory intervention	April 2018	Assistant Director, Children's Services Children's Locality Service Manager	<ul style="list-style-type: none"> • Potential upheaval of reconfiguration of Early Help service and implications for recruitment and retention of staff • Possible perverse incentive to meet targets rather than deliver outcomes
Improve understanding of why more complex young people are coming through the front door in order to determine what can be done to identify them in order intervene earlier and remedy the situation	April 2018	Assistant Director, Children's Services Children's Corporate Parenting Manager	<ul style="list-style-type: none"> • Potential future funding requirement if unable to reconfigure existing services
Develop and monitor delivery of an Emotional Wellbeing Service providing direct intervention to school-aged Lincolnshire children and their families experiencing emotional wellbeing issues	April 2018	Assistant Director, Children's Services Children's Commissioning Service Manager	<ul style="list-style-type: none"> • Potential over-demand on the service • Ability to work effectively with Schools and train teaching staff on early signs of mental health
How will we measure these actions are improving this outcome?			Target:
Number of Looked after Children per 10,000 under 18s* (Plan is best)			48
Number of Children with a Child Protection Plan per 10,000 under 18 years old* (Plan is best)			24
Children becoming the subject of a Child Protection Plan for a second or subsequent time (Lower is better)			13%
Percentage of Social Care Referrals that are re-referrals (Lower is better)			18.5%
Percentage of assessments completed within timescale (Higher is better)			92%
Vacancy Rate of Social Workers (Lower is better)			14%

Outcome 3: Looked After Children feel supported and reach adulthood happy and healthy			
What will we do?	When?	Who will do it?	Are there any risks?
Undertake targeted marketing and recruitment campaigns to support the growth of the in-house Foster Care Market	Ongoing	Assistant Director, Children's Services Children's Regulated Services Manager	<ul style="list-style-type: none"> • Inability to maintain and enhance in-house foster care service a huge financial risk for Children's Services • Competing with independent foster care agencies for foster carers
Improve support to in-house foster carers to increase retention rates and commence a rolling programme of learning from exit interviews	April 2018	Assistant Director, Children's Services Children's Regulated Services Manager	<ul style="list-style-type: none"> • Inability to maintain and enhance in-house foster care service a huge financial risk for Children's Services • Enhancing support requires invest-to-save approach at time of acute financial pressure
Targeted work to support the recruitment and retention of and the ongoing development of in-house Residential Children's Workers leading to the creation of a flexible support service that can meet the needs of all LAC including those with the most complex needs	April 2018	Assistant Director, Children's Services Children's Regulated Services Manager	<ul style="list-style-type: none"> • Ability to recruit and retain staff • Inability to meet the needs of most complex young people likely to result in more expensive placement in independent sector
How will we measure these actions are improving this outcome?			Target:
Average time between a child entering care and moving in with its adoptive family* (Lower is better)			430 days
Average time between the Local Authority receiving court authority to place a child and the Local Authority deciding on a match to an adoptive family* (Lower is better)			200 days
Fostering/adoption of LAC aged 10 to <16 years old (Higher is better)			88%
Stability of placements of looked after children : Number of moves (Lower is better)			8%
Stability of placements of looked after children: length of placement (Higher is better)			68%
Looked after children cases which were reviewed within required timescales (Higher is better)			100%
Participation of LAC in reviews (Higher is better)			100%
Percentage of Looked after children with an up to date health check (Higher is better)			98%
Percentage of Looked after children with an up to date dental check (Higher is better)			98%
Percentage of Looked after children with an up to date routine immunisations (Higher is better)			98%
Percentage of privately fostered children visited within required timescale (Higher is better)			96%

* Indicates targets included within the Council's Business Plan

9. Review Timetable

Action	From	To	Lead
Engage with strategic leads for interim progress monitoring	December 17	January 18	Children's Commissioning
Provide interim progress report to Children's DMT	February 18	February 18	Lead Officers Children's Commissioning
Update commissioning strategy following review	February 18	February 18	Lead Officers
Collate annual review progress monitoring	May 18	June 18	Children's Commissioning
Monitor progress of interdependent commissioning strategies and evaluate impact	May 18	June 18	Lead Officers Children's Commissioning
Draft Annual Commissioning Strategy Review Report to Children's DMT	July 18	July 18	Lead Officers Children's Commissioning
Annual Commissioning Strategy Review Report to C&YP Scrutiny Committee	September 18	September 18	DMT Lead Officer

10. Appendices

Appendix A

Performance Metrics

- Performance Data Overview
- Financial Data Overview



SH Appendix A
Performance Metrics \

Appendix B

Influential Overview

- National and Local Policy
- Stakeholder Engagement
- Marketplace



S&H Appendix B
Influential Overview \