

Commissioning Strategy for Children We Care For Placements 2020-2025

December 2021

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Section 1: Introduction & Purpose

Contextual Note

This document was originally completed during the stay-at-home measures resulting from the 2020 Coronavirus pandemic. Children's social care services, like many others, were quite rightly focusing their efforts on supporting children and families who required extra help during this period of uncertainty, risk and hardship. The refresh in Autumn 2021 demonstrates the effects the pandemic has had on children's needs and demand pressures; one example is a 60% increase in MASH referrals since the COVID pandemic.

It is right and proper that senior management attention is focused on current challenges, and for this reason it has not been possible during this period for commissioners to have the more wide-ranging discussions with service leads and partner agencies regarding Oxfordshire County Council's strategic response to the issues raised and needs forecast by the recently completed Needs Analysis for Placements. But it is important to share with services, partner agencies and providers some of the knowledge gained from the recent Needs Analysis exercise and to indicate those commissioning priorities and intentions currently identified. For this reason, the Strategy records current strategic priorities, targets and position on responses to identified needs and has been refreshed in 2021 with updated strategic priorities and commissioning intentions.

Demand for placements is ongoing and the associated financial challenges mean that it is important to complete this project and continue to make progress in improving the commissioning of services to the children for whom OCC is their corporate parent.

Introduction

For the majority of children, the right place for them to be is at home with their family. Some families may need support, and OCC has an Early Help Strategy in place, as well as introducing the Family Solutions Plus model in 2020 to provide specific and targeted support to families facing particular challenges that can impact on their parenting ability such as mental health issues, substance misuse and domestic abuse.

For those children who need to be in care, OCC recognises and takes seriously its responsibility as their Corporate Parent. Ensuring that children are placed in the most appropriate setting is a key part of this responsibility, as it has so much impact on their outcomes and ability to thrive. The effectiveness of any commissioning approach to children we care for placements is significantly impacted by the quality-of-care planning, individual needs analyses and the quality of the wider universal and targeted services supporting children and families across the whole system.

For most children in care a fostering placement in a family environment is most appropriate, but we recognise that for a small proportion of children a residential setting will be most appropriate for their specific needs - and can be especially effective in providing a stable and secure environment in which children can progress and thrive.

This strategy focuses on sufficiency for mainstream children we care for placements, against a backdrop of increasing numbers of children we care for between 2012 and 2021, and significant overspends in recent years, impacting OCC's ability to forecast demand and develop the market appropriately. It is important to understand, plan for and meet future demand and the individual needs of children. The Needs Analysis and this Strategy are key

tools in enabling this process.

Key partnership and OCC strategies and plans which interface with this document include:

- Oxfordshire Health and Wellbeing Strategy 2018 - 2023
- Oxfordshire SEND Strategy (draft) 2019-2022
- Oxfordshire's Vulnerable Learners Strategy 2018-2021
- Oxfordshire CCG's Operational Plan 2018 - 2022
- Oxfordshire's Child and Adolescent Mental Health Services (CAMHS) Transformation Plan 2016-2021
- Oxfordshire's Early Help Strategy 2018-2022
- Oxfordshire's Transforming Care Plan 2018 - 2021
- Oxfordshire's Early Years Strategy 2020 – 2023

Purpose

The purpose of this Commissioning Strategy is to drive a more consistent and focused approach to sufficiency, cost-effectiveness, market development and (most importantly) good outcomes for children.

This is achieved by sharing with partners and providers via this document:

- key information from the Needs Analysis
- details of OCC key priorities and targets
- forecasts relating to demand, supply and gaps in provision
- commissioning intentions regarding how OCC will address gaps, meet the identified needs, engage with the market and ensure sufficiency

Vision and Strategic Objectives

The Oxfordshire Children and Young People's Plan (2018-2023¹) outlines a vision to make Oxfordshire a great place for children and young people to grow up in and to have the opportunity to become everything they want to be'. To achieve this, our strategic objectives are:

Be Successful To ensure children have the best start in life; ensure they have access to high quality education, employment and motivational training; go to school feeling inspired to stay and learn; and have good self-esteem and faith in themselves.	Be Happy and Healthy Services are available to promote good health and prevent ill health; learn the importance of healthy, secure relationships and having a support network; have access to services to improve overall wellbeing, and easy ways to get active.
Be Safe Ensure children are protected from all types of abuse and neglect; have a place to feel safe and a sense of belonging; access education and support about how to stay safe; and have access to appropriate housing.	Be Supported Children are empowered to know who to speak to when they need support and know that they'll be listened to and believed; can access information in a way that suits them; have inspiring role models; and can talk to staff who are experienced and caring.

¹ [The Oxfordshire Children and Young People's Plan \(2018-2023\)](#)

Section 2: National & Local Context

Legal Framework

The Sufficiency Duty

Section 22G of the Children Act 1989² requires local authorities, so far as is reasonably practicable, to ensure that there is sufficient accommodation for those children that meets their needs and is within their local authority area.

The document 'Statutory guidance on securing sufficient accommodation for looked after children' states:

1.7 Having the right placement in the right place, at the right time, is a vital factor in improving placement stability, which in turn is a critical success factor in relation to better outcomes for looked after children.

In relation to strategic commissioning for children we care for, research with providers and commissioners suggests the key gaps are:

- quality of individual needs assessments and care plans.
- strategic needs assessment and demand analysis.
- market management and development.
- regional and sub-regional collaborations with neighboring LA's to increase buying power.
- procurement including purchasing, contract management, and implementing a category management approach to sourcing.
- adopting a whole system approach to designing universal, targeted and specialist services to improve outcomes for looked after children and children in need at risk of care or custody.
- involvement of children in placement decisions.
- managing the quality of provision in the external market

Although children we care for make up a minority of the total number of children in need, they account for more than half of all local authority spending on children's services. The increase in demand, combined with reductions in funding from central government and increases in care costs has increasingly put local authorities' finances and services under pressure. To meet the increased demand for care, local authorities have been spending on average 10% more than the previous year on children we care for.³

The Government announced two planned reviews: one relating to children's social care and the other relating to the use of unregistered placements.

The government reviewed and consulted on the use of unregulated placements also known as 'other arrangements' accommodation for children under the age of 16 in 2021⁴ The review concluded that the use of un-regulated placements is detrimental to children under the age of 16 and a child under 16 must not be placed in 'other arrangements'

² [Children Act 1989, Section 22](#) and [The Children Act 1989 guidance and regulations](#)

³ NAO, Pressures on children's social care, Report by the Comptroller and Auditor General, January 2019 Available at <https://www.nao.org.uk/wp-content/uploads/2019/01/Pressures-on-Childrens-Social-Care.pdf>

⁴ <https://www.gov.uk/government/news/unregulated-accommodation-banned-for-vulnerable-children-under-16>

except for the exempted regulated settings [Regulation 27A]:

- care homes;
- hospitals;
- residential family centres;
- schools providing accommodation that are not registered as a children’s home;
- establishments providing care and accommodation for children as residential holiday scheme for disabled children.

Key trends over recent years

The table below summarises the trends in Oxfordshire as compared to England over recent years:

National trends	Oxfordshire trends
Between March 2013 and March 2020, the number of children in care increased by 18% , around triple the rate of overall population growth.	In the same period, Oxfordshire experienced a steeper increase in the numbers of children in care, by 85% (from 415 to 767). At the end of August 2021 this had risen by 30 more to 797
In March 2013 56% of children who started to be cared for during the year did so because of abuse or neglect ; by March 2020, this had risen to 61%.	In Oxfordshire the increase was more striking - from 46% in March 2013 to 62% in March 2020.
The percentage of children we care for in foster care reduced from 74% to 72 % between March 2015 and March 2020	In Oxfordshire the proportion of children in foster care reduced from 67% to 64% in the same period
Children in children’s homes, which include secure units, children’s homes and semi-independent living rose from 16% in March 2015 to 23% in March 2020. ⁵	In Oxfordshire, the number of children in children’s homes has increased from 11% in 2015 to 16% in August 2021. 14% of placements are with external providers and just 2% are within OCC homes
Children placed for adoption decreased from 5% to 3% between March 2015 and March 2020.	A greater decrease was seen in Oxfordshire during the same period: 6% to 2%
Average length of stay in care data is not published nationally.	Internal OCC data produced for the Needs Analysis shows an increase in average length of stay in care overall from 366 days to 428 days between 2016-17 and 2018-19. For 2019-20 the average length of stay decreased to an average of 319 days in care, 2020-21 shows an increase to an average of 450 days in care. ⁶



⁵ Includes secure units, children’s homes and semi-independent living accommodation

⁶ OCC Performance & Data Team February 2020

Nationally the percentage of children placed more than 20 more miles from their home is 16%	In 2019/20 37% of OCC's placements were more than 20 miles away from the child's home.
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The increase in children we care for numbers in England has been attributed to a combination of factors⁷ including:

- greater awareness and referrals following high profile cases such as those involving sexual exploitation in Rotherham,
- increasing numbers of children who are vulnerable or at risk from female genital mutilation, County Lines, gang violence, child sexual exploitation, and radicalisation,
- better identification and understanding of children at risk, including domestic abuse, parental mental ill-health and parental substance misuse,
- an increased number of unaccompanied asylum-seeking children,
- poverty and deprivation⁸
- the decrease in the number of children leaving care, especially from 2016-17 onwards (from 31,400 in 2017 to 29,460 in 2019)
- COVID lockdowns affecting families' ability to care for their children

Older children and those who have complex needs can make a foster care placement more difficult to source, often requiring additional services or resulting in being placed in residential care. Across England, demand for residential placements has exceeded the capacity in the market: according to the NAO, only 41% of local authorities reported access to enough places for 16- and 17-year-olds, with less than a third saying the same for 14- and 15-year-olds. As observed in the Foster Care in England review, the shortage of foster carers is often related to *'the availability of carers who can look after more challenging children'*⁹, which adds to the increased demand for residential placements.

- The Independent Children's Homes' Association reports that: The mismatch of supply and demand has seen providers on average being able to increase prices, partly to compensate for the impact of cost pressures driven by statutory increases in the underlying National Living Wage and pension entitlement and increasing costs in recruiting and retaining staff. Over half of all placements happen outside of frameworks commissioned by local authorities indicating that procurement approaches with price controls are proving to be ill-fitted to the sector conditions.¹⁰

⁷According to Child Welfare Inequalities Project, *Identifying and Understanding Inequalities in Child Welfare Intervention Rates: comparative studies in four UK countries*. Briefing Paper 1: England, Bywaters, P. et al, February 2017, children in the most deprived 10% of small neighbourhoods in England were over ten times more likely to be looked after or on a child protection plan than children in the least deprived 10%.

⁸Foster Care in England. A Review for the Department for Education by Sir Martin Narey and Mark Owers, February 2018, p12. Available at https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/679320/Foster_Care_in_England_Review.pdf

⁹The Independent Care Homes Association (ICHA), "State of the Market" survey, 6 January 2020 <https://www.icha.org.uk/wp-content/uploads/2020/02/ICHA-Jan-2020-survey-12-Feb-2020-FINAL.pdf>

¹⁰There are two main drivers for the reduction in spend on internal homes: (1) expenditure on this service is largely stable over the years, against an increase in overall placements spend, and (2) Internal service currently has one home less than previous years, until the new home is completed

- The Competitions and Markets (CMA) Children’s Social Care Study Report in 2021 reported that “Local authorities **face challenges procuring the best placements for their looked-after children**. In some respects, their position is **inherently weak** as they **must make sure a placement is provided for every child, often under considerable time pressure**. This difficulty is **made worse by the ongoing under-supply of appropriate placements**, meaning that local authorities may end up **paying a lot of money for places** which are **not ideal matches** for the children they are placing”

In Oxfordshire, the average annual cost per child increased from £36k in 2015-16 to £51k in February 2020, representing a 41% increase. Although overall expenditure has increased significantly, the proportion of expenditure on each placement type has remained fairly consistent over 5 years. The largest changes are on internal children’s homes (reduced from 7% to 2% of spend), internal fostering (increased from 13% to 15% of spend) and IFA (increased from 18% to 21% of spend).

Key Pressures

Nationally, the key pressures identified for many local authorities include:

- Increase in numbers of children in care
- Increase in the complexity of needs of children we care for and the need for solo placements
- Children are staying longer in care
- Older children entering care with more complex needs and less family-based provision to support them
- Increasing numbers of children placed far from home where it is not in their best interests
- Local Authority and external providers report challenges in recruiting and retaining residential staff and foster carers
- Cost of entry to / expansion within the residential market – particularly for smaller providers
- Covid and the challenges this has presented with staff sickness; the need for staff and children to self-isolate; the inability to move children during lockdowns or for them to maintain family time; covid outbreaks in homes and foster carer illness and fear for the health of their own families
- Unaccompanied children and young people – the mandatory NTS scheme - requirement to take 0.07% of county’s children and YP population. This results in 103 unaccompanied children for Oxfordshire County Council.
- Sufficiency of placements and the difficulties to source appropriate placements at affordable prices
- The quality of external provision has been declining – OFSTED are reporting an increase in suspensions to children’s homes registrations since inspecting began following COVID lock downs.

All of these pressures are also reflected within Oxfordshire with the compounded issue of the cost of living within Oxfordshire and ability to recruit staff on standard rates of pay, this results in higher cost of provision for services within Oxfordshire.

Strategic Aims and Principles

The following aims and principles incorporate a range of priorities and strategic aims reflected in the current Corporate Plan, CYPP, CEF Service Plan and other transformation plan initiatives:

Service Planning Principles

- All provision decisions (internal or external) should be based on best value and evidence of outcomes
- Conscious shift towards keeping families together through use of the FSP model, and reuniting children more quickly where appropriate
- Placements should provide a safe, stable & nurturing environment as local as possible that will meet the needs of the child
- The care pathway should focus on enabling children to exit the care system sooner with appropriate support, where that is the right thing for them

Children's Needs & Placements

- OCC will work positively and collaboratively with existing and potential providers to develop a range of appropriate provision to meet the needs of Oxfordshire's children within County (ensuring access to services, continuity of schooling, maintenance of support networks)
- OCC will share what we are learning about our children's needs and features through the Valuing Care needs assessment tool, to identify what is needed from the local market to support those needs and that the needs assessment tool needs updating more regularly following the original placement request.

Market Development & Support

- OCC supports a mixed economy of provision, further developing both in-house and external provision
- OCC works in partnership with other agencies, external providers and other local authorities in order to ensure sufficiency and maximise value for money
- OCC wish to develop dedicated specialist provision for (often) older children with more complex needs, who are trauma-experienced and unable to thrive in mainstream settings
- OCC is committed to continue working with external providers (both IFA and residential) to further develop services within Oxfordshire

Feedback from Children

- The voice of the child should be heard more strongly wherever they are placed
- OCC wishes to strengthen its mechanisms to consult with children, involve them in decision making and deliver its responsibilities as a Corporate Parent.

Section 3: Overview of Children We Care For and Services in Oxfordshire

In 2019-20 OCC spent an anticipated total outturn of £45m on children we care for (including staffing, SGO fees and Adoption support). This figure is forecast to rise to approximately £61m in 2023-24 (all forecast budget figures were calculated prior to completion of the 2020 Needs Analysis which forecasts a higher annual number of overall children we care for than previously anticipated).

As of September 2021, there were 792 children in care in Oxfordshire. Of them

- 57% of them were boys.
- 44% were aged 10-15.
- 77% them were white, 12% of mixed background.
- 43 of them were unaccompanied children (70% of whom are boys, and nearly half are 17 years old).
- 23% of all children in care in Oxfordshire were young people 16+.
- 10.9% had a disability.

The profile of Oxfordshire's children in care is also changing slightly. There have been consistently more boys than girls in care in Oxfordshire, but the proportion of boys has increased slightly. In terms of the age profile of children we care for in Oxfordshire, 10–15-year-olds have consistently been the largest group since 2013-14 and that group has seen a significant increase since 2013-14, alongside 16+ (see *Appendix 2*). Older children coming into care had profound implications for placements, which added to the pressures to meet demand and contain costs.

Another factor that contributed to the increase in children we care for numbers has been a decline both locally and nationally in children ceasing care. In 2015/16 55% of the children in care at the start of the year, left in the year. By 2020/21 this had dropped to 35%.

Oxfordshire has various mechanisms to ensure the voices of children in care are heard and their concerns are addressed appropriately. Findings from recent surveys regarding their placements showed:

- The majority of children (87%) always felt safe where they lived.
- Nearly all of them said that the adults they lived with showed an interest in their education.
- Most of them liked school.
- Most reported that they trusted the adults they lived with, and their social worker.
- Younger children (4-7 yrs.) were less likely to know who their social worker was compared to the older groups.

For younger children concerns were related mostly to their life story and not knowing why they were in care. For children 11+ years old, concerns related mostly to being included in decisions made about them. Low well-being seems to be an issue across all children in care, but especially among girls. For younger children, low well-being was related with contact with their birth family and siblings, and for 11–18-year-olds, low well-being seemed to be related with not feeling safe or settled where they lived; difficulty in getting in touch

with their social worker, and limited opportunities for hobbies or to explore the outdoors.

Assessing Individual Needs

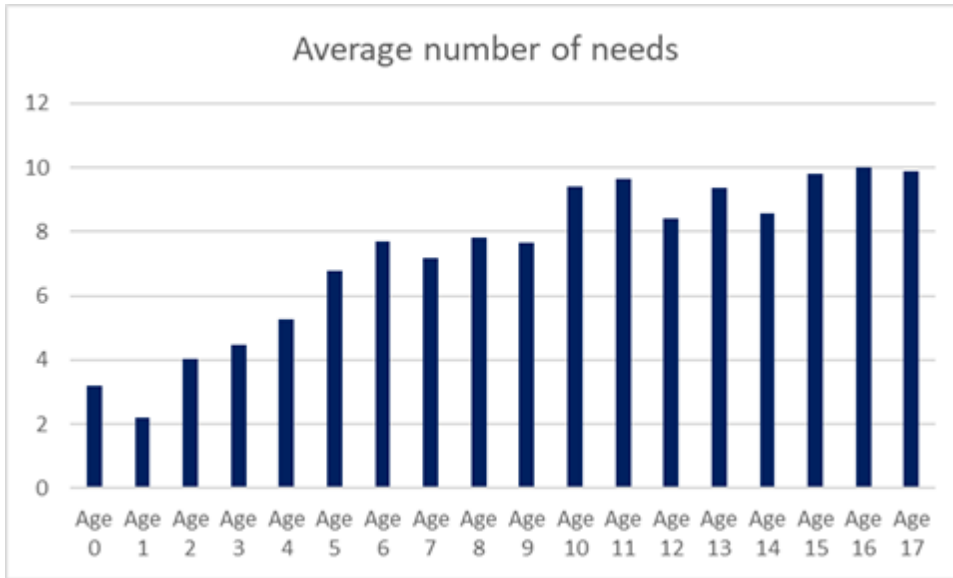
Extract from Sufficiency Duty Statutory Guidance:

A robust needs assessment is the starting point for all commissioning decisions for a child's services.... An incorrect decision at this point will lead to vastly inefficient or ineffective service provision.

In 2019, Oxfordshire rolled out mainstream use of the Valuing Care Assessment Tool, which is now used for all children entering care and allows social workers to assess a child's individual needs across 13 domains, using a common scoring mechanism.

The number of needs a child has tends to rise with age till they are 10 and then levels out. Boys tend to have higher needs than girls. The highest level of needs are supported in residential care. The most common needs identified are supporting children to form safe relationships, strengthen their emotional health and supporting them with issues over their emotions and boundaries (see Appendix 3)

Chart 1: Average needs score by age



Children in residential care have both a higher number of needs and a greater proportion of needs which require a specialist placement

	% with a specialist need	Average needs
Residential	75%	10.6
Parents	42%	8.2
Independent living	41%	9.3
Foster care	36%	8.0
Placed for adoption	14%	3.8
All	43%	8.4

The graph below shows the most common type of need across all accommodation types

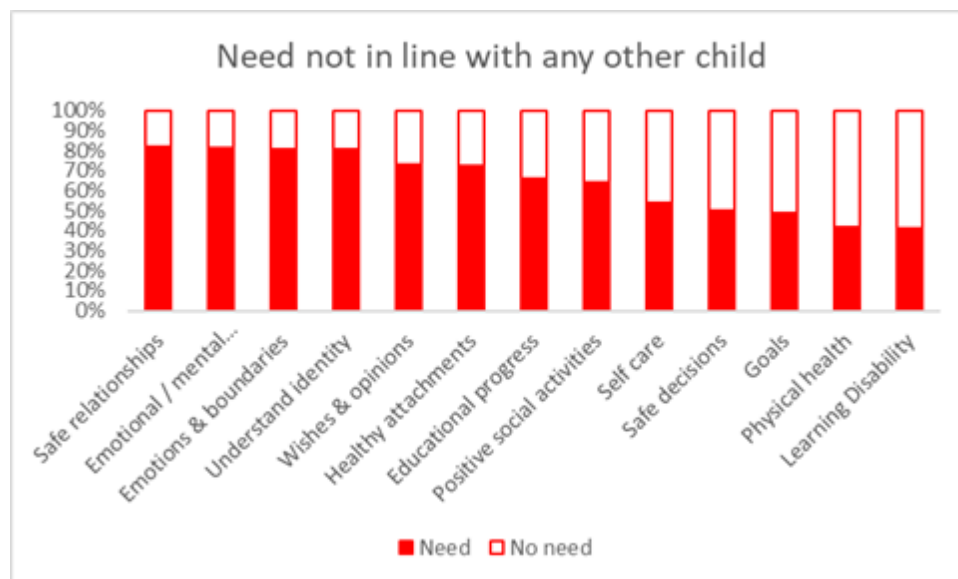


Table 1: Needs scores by placement type

	Residential	Foster Care	All CWCF
Safe relationships	5	1	1
Manage emotions & boundaries	1	4	2
Emotional Mental Health	2	2	3
Understands identity / life story	6	3	4
Expresses wishes and opinions	9	5	5
Healthy attachments and Friendships	3	6	6
Educational Progress	4	7	7
Positive Social activities	7	8	8
Age-appropriate self-care	10	9	9
Safe decisions	8	11	10
Age-Appropriate Goals	11	10	11
Physical health	13	12	12
Learning Disability	12	13	13

The analysis of the last 12 months SDQ outcomes showed that 26% or a quarter of all of children we care for who have had a completed SDQ during this period have high or very high scores. 17% have medium scores and 57% have lower scores. Although the number of high or very high scores appears to be decreasing the level of need for the children with high or very high scores represents a high level of complexity. There remains a need to promote a more holistic approach to children we care for mental health needs as a part of the service planning and strategic commissioning activity.

Current provision

In Oxfordshire at September 2021, 67% of children we care for were in foster care, and 16% were in residential placements (increased from 11% in 2015), consisting of 14%¹¹ in external placements and 2% in internal placements. The number of external residential and IFA placements increased, against a decrease in OCC foster carers since 2012-13 (see *Appendix 5*).

The key challenge regarding placements is the lack of in county provision in Oxfordshire. Our needs analysis showed that the proportion of out of county placements has increased over the years, from around 25% to 37% against a national average of 16%.

Of all current children we cared for at February 2020, 374 of 783 (48%) are placed in internal OCC provision (or with parents).

For those children in fostering and residential placements only (total 628), 51% overall are placed externally and 49% internally (see charts below). Internal figures include kinship carers.

Fostering

Oxfordshire has a mixed market in fostering where we both commission and directly provide foster care through our foster and kinship carers. OCC market research during 2019 records one registered IFA office based within the County and a couple of other providers who have carers based within Oxfordshire, in addition to OCC's own internal service.

The *percentage of overall children we care for who live with OCC foster parents* decreased from 49% in 2014/15 to 38% in August 2021. In the same period, children with IFA carers increased from 18% to 28%.

Placement Type		2014/15	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	31/08/21
Foster placements	No.	344	407	463	474	540	478	499	519
	%	67%	68%	70%	69%	69%	62%	64%	66%
OCC mainstream kinship	No.	251	290	315	289	350	280	283	297
	%	49%	49%	47%	42%	45%	36%	36%	38%
IFA	No.	93	117	148	185	190	198	216	222

	%	18 %	20%	22 %	27%	24 %	26%	28%	28%
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Note: % of overall CWCF

One reason for this is the decline in the number of approved foster carers, from 520 in 2014/15 to 316 in February 2020. Service records show that enquiries, applications, and approvals have also fallen significantly and COVID has contributed towards this.

¹¹ Including Childrens Homes and Residential Schools: OCC dataset on Current LAC 06.02.2020

OCC has recently initiated a project to address the decline in in-house foster carers, which includes increased fees, the introduction of a co-produced Foster Carer Charter and the implementation of a Tiered structure to categorise carers and provide targeted training and support at different levels. OCC is also expanding its Mockingbird hubs to provide further support to in-house carers.

The decline in OCC’s mainstream foster carers has been partly offset by the increase in kinship carers locally; the number of kinship carers increased from 91 to 142 in the same period.

OCC’s main route for sourcing external foster placements is the South-Central Independent Fostering Agency framework, which is commissioned jointly with 14 Local Authorities. Providers offer agreed prices in the four categories of placement – mainstream, disabilities, parent and child and, ‘alternative to residential’ (which will be replaced by ‘enhanced fostering’ from 1st April 2022), identifies providers who are willing to find foster placements for children with complex needs who would otherwise be placed in residential care. However, this is the category of children that OCC is finding most difficult to place, suggesting a lack of sufficiency via the framework resulting in increased placements into residential provision.

Although the number of providers overall appears to have increased each year, at March 2019 there were 108 places available within Oxfordshire with a significant lack of provision across the North and West of the County.

Residential

OCC also has a mixed market for residential placements, though only a small proportion of provision is internal.

OCC currently has 5 internal settings, with one new setting in the planning stages. Of the five existing homes, one is a children’s home, two are assessment homes (provision registered with Ofsted), and two are 16+ provisions that offer move on accommodation for children who are preparing to transition to independent living (unregistered provision). The total number of beds in the 5 homes is 26. The new home is expected to have 4 beds and will be registered for SEMH provision, which is more specialist than the existing home. All OCC homes are mixed-gender and can accommodate young people age 12-18 . Having internal homes provides OCC with a flexibility and space to assess children’s needs before moving on to more long-term placements or returning home. As the table below shows, the current internal capacity represents only 2% of CWCF.

		201 4/15	201 5/16	201 6/17	201 7/18	201 8/19	201 9/20	2020/2 1	31/08/ 2021
Residential	No.	85	95	101	100	106	110	115	114
	%	17%	16%	15%	15%	14%	14%	15%	16%
OCC children's homes	No.	13	10	9	8	9	8	9	13
	%	3%	2%	1%	1%	1%	1%	1%	2%
External residential	No.	72	85	92	92	97	102	106	101

	.								
	%	14 %	14%	14 %	13%	12 %	13%	14%	14%

Note: % of overall CWCF. Figures provided for OCC Homes is for those that are registered with Ofsted.

The majority of children in residential care are in external residential homes (around 14% of total CWCF). OCC market research during 2019 records a total of 12 children’s homes with 64 beds, plus 3 residential schools within the County. This highlights the overall lack of sufficiency in the area.

Some placements are purchased through the South-Central Residential Agreement Framework, which is a partnership between 20 local authorities in the South sourcing residential placements for children we care for. Total beds available in Oxfordshire at April 2019 was 36 (across 6 homes), with 9 vacancies (25%). The only in-County framework provision is in the North, though there are a number of other children’s homes (some with associated schools) within County.

Block contracts may be called off by individual consortium members, OCC has a block contract for a total of 15 exclusive use mainstream residential beds within County (or within 10 miles of the border). This contract is specifically intended to increase ‘close to home’ provision, with some flexibility on location in recognition of the challenges relating to property prices and employment levels within the County. In December 2021 and January 2022 two homes within the block contract were suspended by OFSTED which has affected OCC’s residential capacity in county resulting in emergency placements required for 7 children. The quality concerns have long term affects on the provider’s ability to meet the needs on the contract placing additional pressure on the sufficiency for children we care for.

OCC also has access to up to 15 beds as part of the Cross Regional Contract (CRC), for which it is the lead commissioner. The contract offers a therapeutic model of care for children with more complex needs and includes education provision at an inclusive price. Currently there are 8 homes located in Bucks, Herts, Oxfordshire and Milton Keynes.

One of the homes is in Oxfordshire, though OCC does not have exclusive rights to these beds. There is an option to purchase additional beds within the contract which the Start Well Commissioning team are exploring.

OCC still relies significantly on spot purchasing for residential placements (55% of residential placements at December 2021), which suggests that current frameworks and block contracts are not able to provide in-county sufficiency.

There are currently different approaches to placement oversight for internal / external provision and also for placements made via spot / block / framework arrangements as documented in the Joint Placements Protocol launched in December 2021.

Extract from Sufficiency Duty Statutory Guidance:

All services, including those provided by the local authority, will be performance managed through a contract, grant, service level agreement or other similar approach – based on the needs and specific outcomes described in the child’s individual assessment. Performance management should be evidence-based.

Young People's Supported Accommodation

The Young People's Supported Accommodation (YPSA) Service was commissioned in 2020 with services starting on the 1 October 2020 and offers, 80 in-house beds (delivered by the Residential and Edge of Care service), 208 commissioned beds (of which 10 beds are out of county), alongside the capacity offered through existing in-house supported accommodation services which include the Supported Lodgings Scheme, Move On Homes and the House Project. This YPSA service was co-commissioned in partnership with City and District Councils, with Oxfordshire County Council (OCC) as the Lead Commissioner. The YPSA service is not up to full capacity, a further 24 units are required to be secured by the provider across contracts SP1 (Shared accommodation with up to four young people living together - 16-17) and SP5 (Shared accommodation with up to four young people living together – 18-24) contracts. Move on accommodation from the pathway continues to be a challenge due to the lack of self-contained and shared accommodation for 18 yr. olds from the private sector.

Feedback from Providers

The following list is a summary of key points made by providers via a range of recent events and other contacts, relating to what they seek from the Council:

- A clear understanding of Oxfordshire's children we care for profile and their needs
- What services are available / intended in-house, and what OCC needs from its market
- OCC's commissioning priorities and intentions over the next 5 years
- Open and honest dialogue relating to market / service development, as well as when things go wrong
- Clarity on what is meant by 'therapeutic' placements
- Easy to apply tendering processes to enable bids from a range of providers including from providers within the voluntary sector

The recent Strategic Needs Analysis work has informed some of the detail in this document relating to needs and current provision. This Strategy will continue to develop across 2022 to give a clearer indication of commissioning priorities and specific intentions, as well as those provisions that OCC seeks to source from the external market.

Gaps and Challenges in Oxfordshire

The Children We Care For Placements Needs Analysis identifies the following gaps in provision:

- Mainstream fostering placements, particularly for older children
- Emergency / short-term fostering placements
- Alternative to residential and step-down fostering placements

- Residential placements offering a clinically validated therapeutic model
- Smaller residential settings of 1-2 bed homes for solo placements
- Psychological support services for children who don't meet CAMHS criteria
- Direct feedback from individual children – children in care council
- Over-reliance on frameworks that don't offer sufficiency or good quality
- Inconsistent approach to quality assurance and oversight of children's placements (internal v external and spot v contract placements)

Demand forecasts

Based on the current proportions of placements, and no policy change at national and local level, Oxfordshire's Strategic Needs Analysis estimated the following number of residential and fostering placements from 2020 to 2025. Although these figures represent current proportions as opposed to desired, they give an indication of the likely level of provision required over the next 5 years.

	2020	2021	2022	2023	2024	2025
CWCF Forecast based on OCC population projections and 5% decrease year on year from April 2021 due to FSP	796	813	790	805	818	828
Children's Homes (all) 15.8% of CWCF	126	128	125	127	129	131
External children's homes based on 15% of CWCF	119	122	119	121	123	124
16+ (all) 10% of CWCF	80	81	79	81	82	83
External 16+ residential based on 9.3% of CWCF	74	76	73	75	76	77
All Fostering placements based on 64% of CWCF	509	520	506	515	524	530
IFA placements based on 25% of CWCF	199	203	198	201	205	207

Additional analysis on a range of specific placements made into fostering and residential settings either via emergency teams or to alternative provision types has led to the following estimates relating to more specialised requirements:

- Established need for 8 additional specialist fostering placements p.a. for children ready to step down from residential care or needing a higher level of fostering support which is currently not available (hence entering residential placements instead)
- If sufficient provision above were available, this could release up to 8 mainstream residential places p.a.
- Estimated 12 placements p.a. in solo or smaller (2-3 bed) residential settings operating a clinically validated therapeutic model for trauma-experienced children and young people

OCC does not currently have the capacity to provide these services in-house (other than a proportion of the fostering placements under (a) above) and is likely to be seeking to commission external provision alongside building additional in-house provision which includes a 4-bed children's home for completion in 2023 and a business case is being drawn up to apply for further capital investment to build 3 more children's homes over the next 5 years funded by OCC's capital program.

Section 4: Strategic Priorities and Commissioning Intentions

The following commissioning priorities and intentions have arisen from existing service planning and transformation work, as well as the recent needs analysis project:

Key Commissioning Priorities	Commissioning Intentions
<p>Service Planning</p> <ul style="list-style-type: none"> - Service planning will be based on the 2020 Needs Analysis and sufficiency planning will focus on the needs of all children we care for, across internal and external provision - Reduce the number of children coming into care through targeted early help, in particular through the introduction of FSP - Aiming to reflect Statistical Neighbour (SN) and / or national figures for placement types - Ensure that settings keep children safe, enable them to thrive and offer best value, whether provided in-house or by the external market - Focus on providing the right placement first time, except where a short-term placement is in the best interests of the child. 	<ul style="list-style-type: none"> - Overall focus on FSP model to support more children to remain with (or return more quickly to) their birth families, resulting in a 5% reduction p.a. - Overall CWCF rate to remain in line with SN (March 2019 OCC at 54 per 10k, against a target of 49) - Increase total fostering placements from 69% of overall CWCF to 72% <ul style="list-style-type: none"> - Reduce total residential placements from 14% of overall LAC to 12% - Provide family-based care wherever possible - All placements to receive appropriate oversight of quality, outcomes and safeguarding through a single common process
<p>Children's Needs and Placements</p> <ul style="list-style-type: none"> - OCC to reduce current rate of Out of County and over 20 miles from home placements to align with SN averages (March 2019 figure was 31% or 241 children) against SN rate of 24% - Look at groups of children and providers to understand trends in needs and progress achieved - Ensure that all children we care for receive the relevant psychological and clinical 	<ul style="list-style-type: none"> - At September 2021 792 children in placement. 24%.24 represents 190 children – a reduction of 55 children placed Out of County - All children we care for entering care to have a needs assessment completed - Review progress of individual children, and provider's ability to meet those needs - Attach service provides psychological support to children we care for placements to

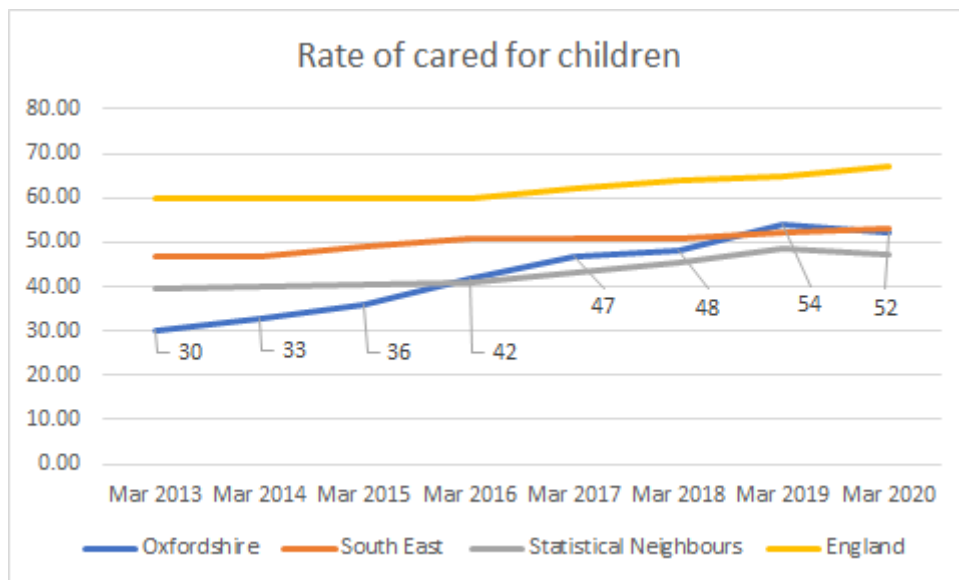
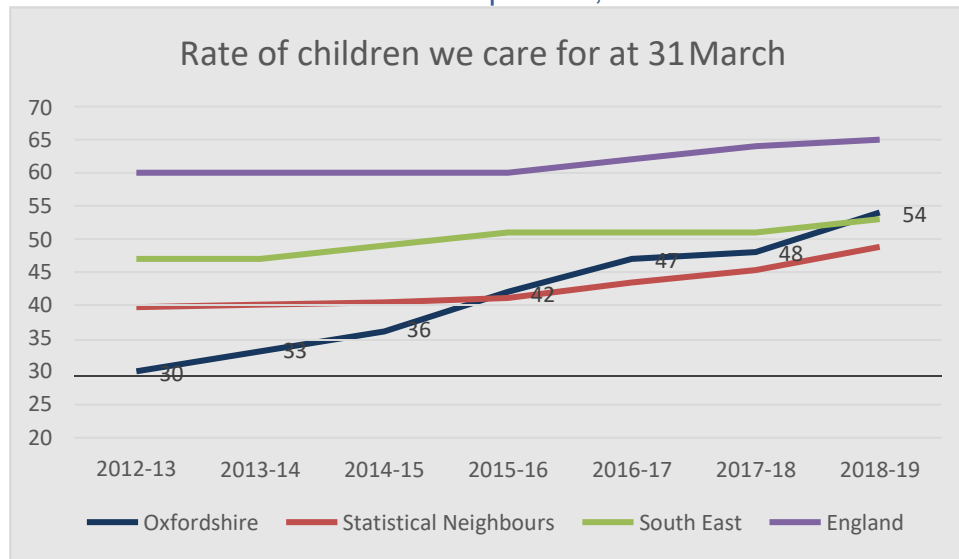
<p>support to address their mental health and emotional wellbeing needs</p> <ul style="list-style-type: none"> - Ensure a clearer understanding and definition of 'therapeutic' placements for trauma experienced children 	<p>support placement stability. Access via the child's social worker</p> <ul style="list-style-type: none"> - Clinical Team and CAMHS also support some children we care for directly – access via SPA - Work with providers and internal clinical teams to develop clear specification for placements which provide a therapeutic environment, based on an evidenced clinical model
<p>Market Development and Support</p> <ul style="list-style-type: none"> - OCC wishes to better understand our internal cost base to ensure that value for money commissioning decisions are based on appropriate comparisons - Targets reflect Statistical Neighbour and / or England figures for proportion of provider types - Source smaller 1 or 2-3 bed homes and fostering households providing a therapeutic approach for trauma- experienced children - Undertake detailed market analysis and structured engagement regarding more specific proposals to develop further in-County provision. Looking at different ways to secure sufficiency, more broadly than traditional procurement approaches - Engage in structured discussions with IFA market regarding definition of specialist placements as identified in the Needs Analysis 	<ul style="list-style-type: none"> - Undertake a robust costing exercise to ensure that internal services are fully costed before the 'make or buy' decision is approached - Secure further exclusive use of existing in-County fostering placements and residential beds - Reduce the proportion of IFA mainstream placements to 33% by 2025 (currently at 51%), recognising that overall FC placement requirement is likely to increase above previous estimates - Develop a specific target for Kinship carers and increase conversion of kinship placements to SGOs - Work with providers to develop specialist fostering placements (e.g., emergency, Tier 4, alternative to residential) externally, based on a clear specification for description of 'specialist' - Work with providers to develop solo and smaller (2/3 bed) settings providing a therapeutic environment, based on a clinically evidenced model - Provide better support to the market to understand individual children's needs and offer improved support in placement - Liaise with providers ref suitable locations for homes - Explore wider range of procurement vehicles, including

	<p>new frameworks, further block, DPS etc</p> <ul style="list-style-type: none">- Better understanding of all provision within County, in particular number of IFA placements available and
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	<p>residential beds by type and location (not just frameworks)</p> <ul style="list-style-type: none"> - Better understanding of wider market and providers who may be encouraged to develop services within the County
<p>Children’s Feedback and Participation</p> <ul style="list-style-type: none"> - Review our current mechanisms for engaging children’s views and participation - Involve children more directly in decision making about their care - Strengthen the role of the Corporate Parenting Panel in championing the child’s voice - Provide clarity on how we expect providers to children’s feedback in placement 	<ul style="list-style-type: none"> - Improved methodology to use self-advocacy apps from Mind of My Own, NYAS Advocacy services and feedback from statutory reviews to enable more direct feedback from individual children - Deliver 2 new apprenticeships to support development of the participation and engagement service - OCC expects providers to be using an approved feedback tool to engage children and young people in their care plans

Appendices

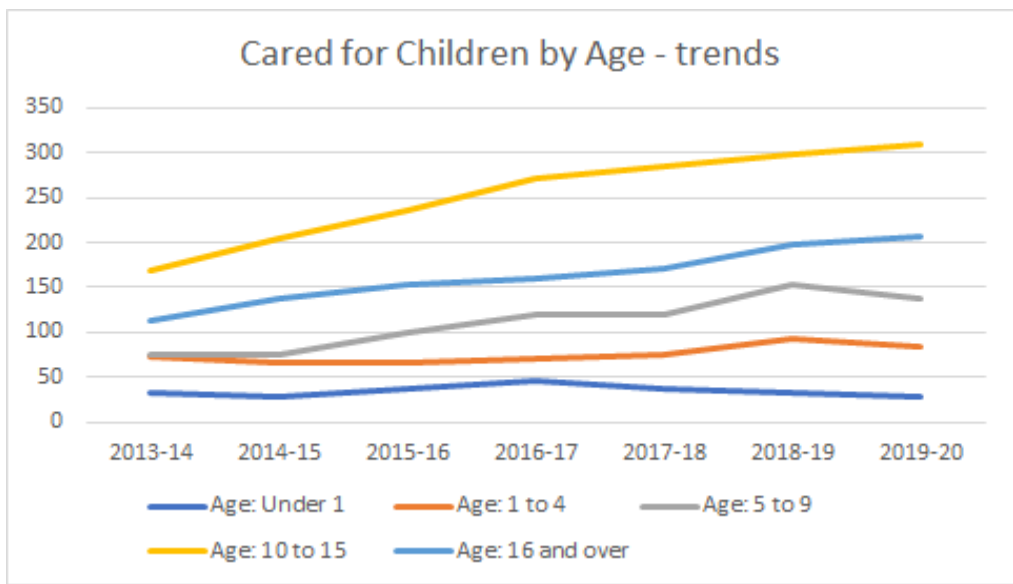
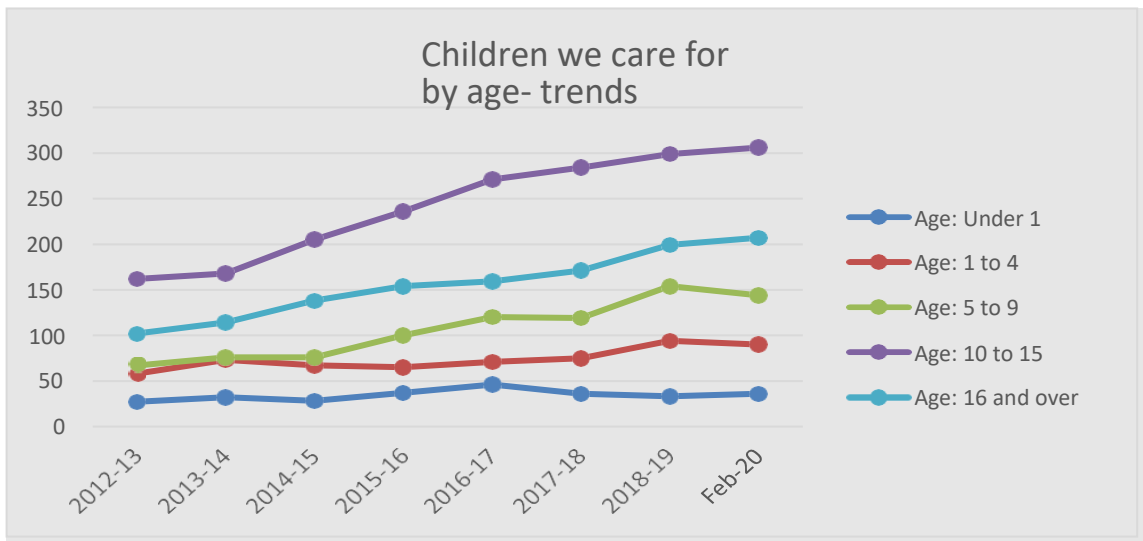
Appendix 1: CWCF rate in Oxfordshire in comparison, 2012-19



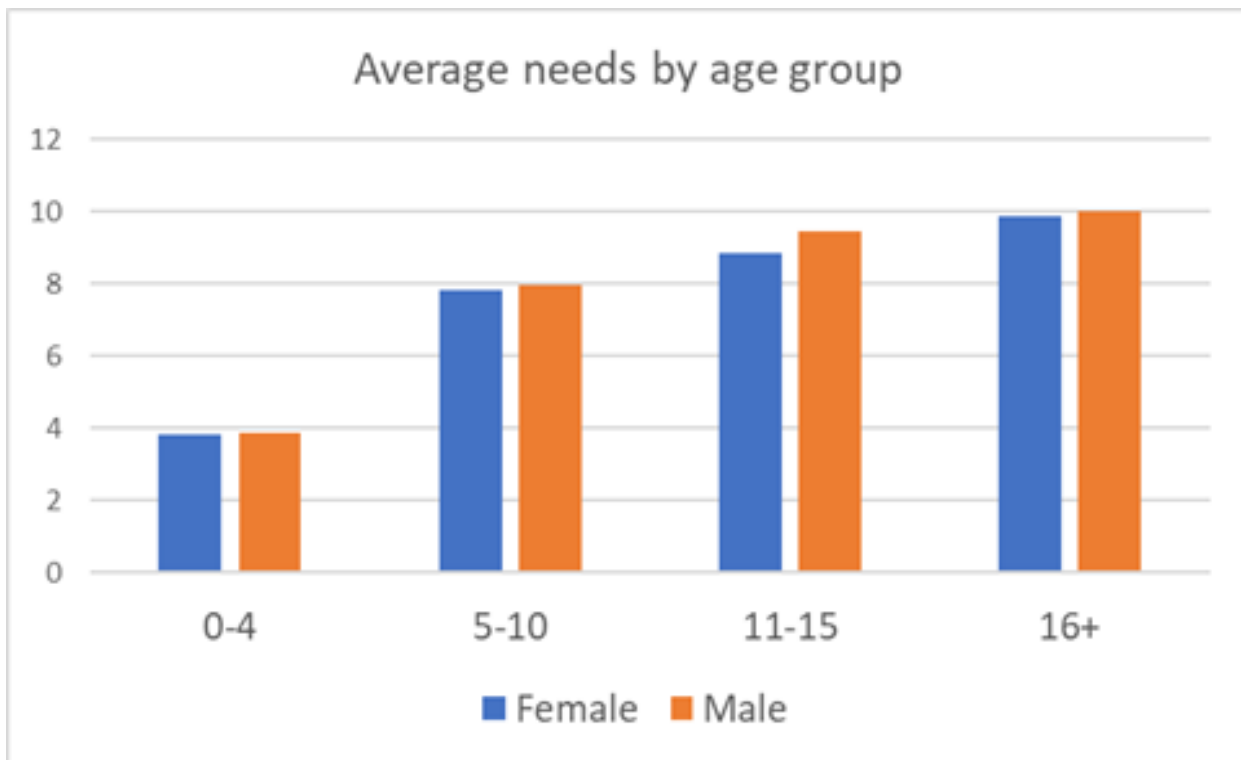
Source: Department for Education (DfE), Looked After Children Statistics, 2013-2020

One of the most striking changes in the profile of children we care for in Oxfordshire is the age profile. As can be seen in chart below, the increase in the number of 10-15 year olds has been faster than any other age group since 2012-13.

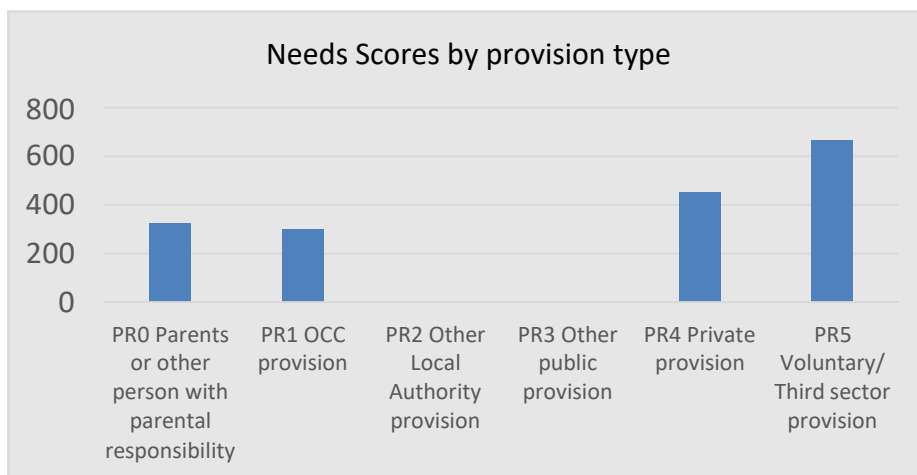
Appendix 2: CWCF age trends, 2012-13 to February 2020

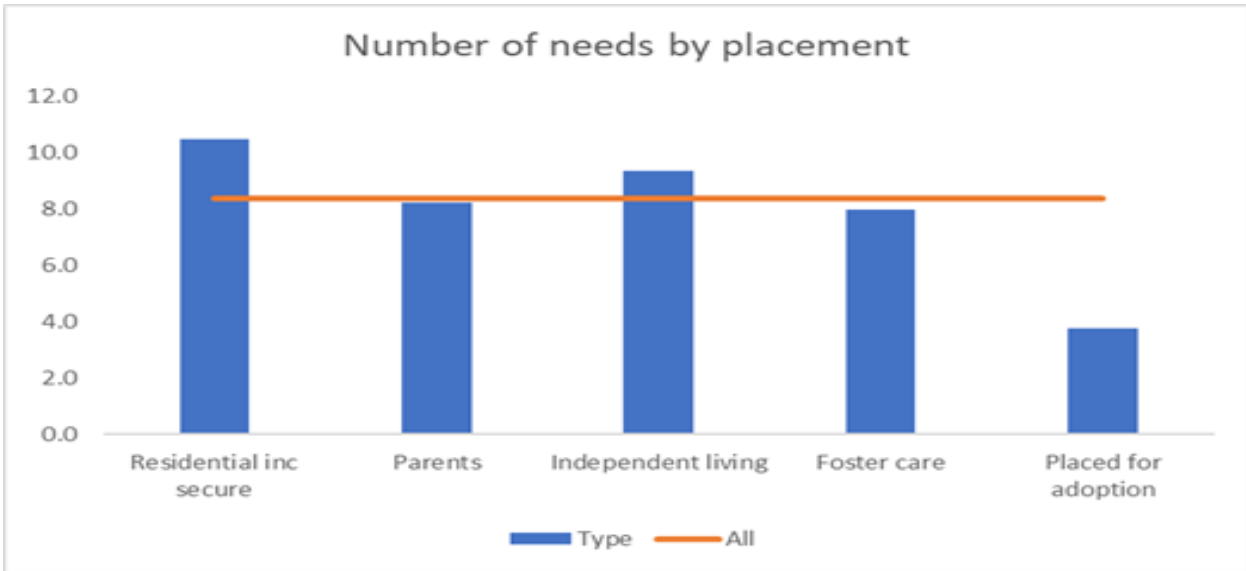


Appendix 3: Needs score by age group and gender



Appendix 4: Needs score by provision type





Appendix 5: Trends in placement type, 2013-2020

