#### **Bridgend County Borough Council**

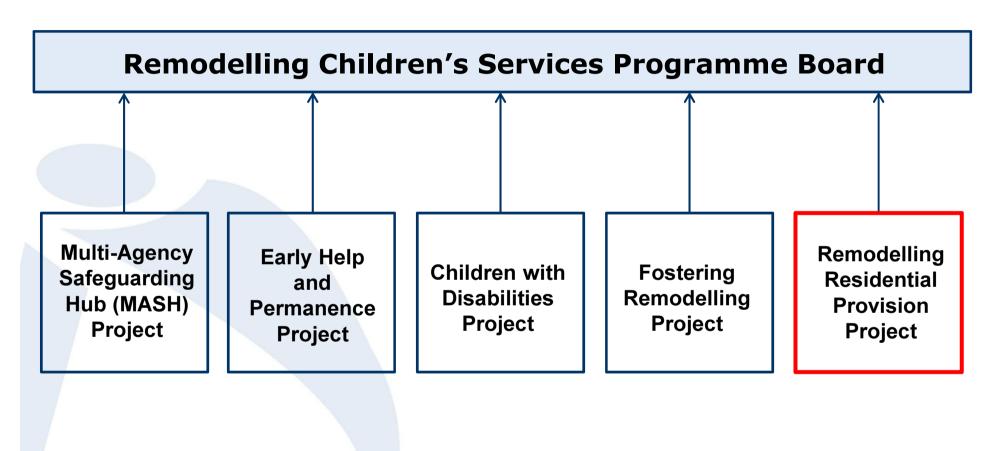
Cyngor Bwrdeistref Sirol Pen-y-bont ar Ogwr



# Children's Social Care Residential Remodelling Proposal

Presentation to Overview and Scrutiny Committee 1
18 January 2018

## Overview of Children's Remodelling





### Challenges with the existing model

Young people presenting with increasingly complex needs but insufficient placements to support this

A lack of control over resident 'mix' in homes due to restrictions in Statements of Purpose

Insufficient move-on facilities resulting in longer residential placements than is necessary

No emergency beds

Staff only able to provide minimal outreach support

Too many young people being placed Out-Of-County



#### Aims of the project

## The overall aims of the Remodelling Residential Provision Project are:

- To achieve the **best possible outcomes** for the children and young people we support
- To increase the number, types and flexibility of placements that are available
- To provide **integrated**, **wrap-around support** that can meet all the needs and ambitions of each person being supported
- To minimise placement breakdowns by achieving placement stability as soon as possible
- / To achieve cashable savings in line with MTFS targets



## Development of the proposed model

Research into evidence based best practice: e.g. North Yorkshire's 'No Wrong Door' Model

#### 'No Wrong Door' - Outcomes

- Decrease in number of placement moves
- Lower number of Out Of Area Placements
- Reduction in criminal activity and substance misuse
- Number of missing person incidents halved
- Cost benefits being realised



## Development of the proposed model

Engagement with young people that we currently support

Research into evidence based best practice: e.g. North Yorkshire's 'No Wrong Door' Model Engagement with young people who have left our care

**Proposal** 

Engagement with all stakeholders on final proposed model

Engagement
with/contributions
from residential staff
members

Meetings and development workshops with internal and external stakeholders



### Comparison of placement numbers

	Emergency residential	Newbridge residential	Sunnybank residential	Transitional carers	Supported lodgings	Preparation for independence/ Supported Living	Totals
Current	0	4	4	0	8	2	18
Proposed	2	4	4	6+	10+	4-6	30+

Beds at Newbridge under the current model Beds at
Newbridge under
the proposed
model

Number of spaces at Sunnybank staying the same but age criteria changing



4 Bed Medium-Term Unit

Transitional carers

Supported Living

- Two emergency and four short term assessment beds
- Age: 11 to 17
- Maximum length of stay: 72 hours for emergency and 6 months for short term/assessment placements
- Staffed 24/7 with outreach to young people/families/carers etc.
- Therapeutic staff based at the Hub
- Space for therapeutic intervention and education to be delivered
- Initially based at Newbridge House



The Huk

4 Bed Medium-Term Unit

Transitional carers

Supported Living

- Four beds for children and young people that need support for a longer period of time
- Age: 11-17
- Maximum length of stay: up to 5 years in line with care planning
- Will be able to access the therapeutic intervention and education support provided at the Hub
- Based at Sunnybank



4 Bed Medium-Term Unit

Transitional carers

Supported Living

- Six transitional Carers will be recruited to act as an intensive step-down placement option for children and young people moving on from residential units
- Support young people through the transition from residential to a family placement before they are placed long-term in order to reduce the risk of multiple family placement breakdowns
- Age: up to 17
- Maximum length of stay: up to 24 weeks
- Paid at a higher rate and trained to support complex need
- Clarifications from previous meeting:
  - We will recruit internally and externally
  - Fostering project running alongside to recruit more mainstream foster carers



4 Bed Medium-Term Unit

Transitional carers

Supported Living

- Semi-independent supported accommodation option for young people aged 16+. For those who are leaving care, it will provide a 'stepping-stone' between care and the move on to total independence
- Number of independent units with 24/7 on-site support that can be flexed up/down depending on the needs of the individual
- Age: 16+
- Currently scoping need/demand levels specifics of this service will be developed with Supporting People via their grant application process



4 Bed Medium-Term Unit

Transitional carers

Supported Living

- A non-regulated placement for a young person within a supported home environment
- The young person has their own room and is a resident fulltime within the property but pursues their own lifestyle outside of the house
- Whilst the support provided is less intensive than a fostering placement, it is greater than what the young person would receive if they lived independently
- Age: 16+
- Maximum length of stay: No maximum length up to the age of 21 or up to the age of 25 if in education or training
- Clarification from last meeting: non LAC will be SP funded,
   LAC will be jointly funded by Supporting People and Children's



#### **Journey Example 1**

#### Journey through current service model

Background: Complex needs - diagnosed with ADHD and supported by CAMHS. Found it difficult to form relationships with peers

Entered Sunnybank after a breakdown of fostering placements but found it difficult to make relationships with other young people

Deterioration in behaviour led to a placement being found Out-Of-County. On return, a placement was made at Newbridge to increase independence skills.

Young person moved back home at 18 with staff highlighting concerns that this may breakdown

Post-18 they presented as homeless after family placement broke down.

A period of assessment at the Hub would have allowed for clear understanding of their emotional, therapeutic and basic needs, which would assist with effective planning

A therapeutic staff team would be equipped to meet their emotional and psychological needs within a residential placement.

The access to therapist input would be readily available to undertake the necessary work to assist them to move on to a therapeutic fostering placement and not out-of-county

The access to the trained therapeutic foster carers would allow for continued work inhouse in conjunction with the hub, which would assist in identifying the right type of accommodation and the necessary support required to enable them to settle long-term

Following move on they would have been supported by their P.A. and outreach from the Hub, ensuring any issue that arose could be responded to in a timely way.

#### **Journey Example 2**

#### Journey through current service model

Background: case opened in 2016, frequently reported missing, high risk, concerns around CSE

Quickly moved between four fostering placements but maintained desire to be independent NOT in fostering

Settled in a high-cost supported living placement after fostering breakdowns

Will most likely be moved to a housing service when approaching 18

Would have independent living available in house through the proposed model, either Supported Living or Supported Lodgings depending on level of need. Would eliminate need to refer for a fostering placement.

In-house supported living creates more consistency of support and reduces costs

Could be placed in Supported Living when 17. Support could reduce gradually up to their 18<sup>th</sup> birthday ready for independence. They could then remain in Supported Living post-18<sup>th</sup> Birthday until ready for an independent home, creating consistency through to adulthood.

#### **Journey Example 3**

#### Journey through current service model

Background: became looked after due to neglect, removed at a very young age and adopted with sibling. Adoption broke down in 2011 due to family circumstances.

Has had over 20 placements including: inhouse and independent fostering (both in and out of county), internal and private residential homes. A few of the fostering placements have been successful for a number of months but eventually broke down

Currently in high cost Supported Living which he is settling into and has commenced a work training programme

Many options to prevent multiple placement breakdowns and maintain one of the strong fostering placement relationships that did break down. The aim would be to prevent the placement breakdown cycle. Options would include:

- Putting additional therapy and support into foster placement
- Additional training available to foster carers
- Foster carer supported by Transitional Carer (TC)
- Placement with TC
- Emergency and planned respite in the Hub or with TC
- Outreach support from residential staff
- Education available through the Hub following school exclusion

If there was a need for Supported Living following the support listed above, in-house supported living creates more consistency of support and reduces costs – would be able to stay close to home and have consistent staff working with them dayto-day