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OVERVIEW

1. In the Vale of Glamorgan Council Corporate Plan (2013-17), the intended outcome for children and young people is that they are engaged and supported and take full advantage of life opportunities available in their local community and beyond. The principal goal of Children and Young People Services is to ensure that effective help and support reach those vulnerable children, young people and families assessed as being 'in need'.
2. We achieve our goal by offering a range of services. Many of them are designed to support a child or young person to remain living within their own family or in their local community. Where this is not possible or it is not safe to do so, we aim to find placements for them that meet their needs. Most often, this means that they live in foster care within the Vale of Glamorgan so that they can maintain their links with family, friends and school.
3. The National Framework for the Assessment of Children in Need and their Families provides a way of looking at, understanding and recording what is happening to children and families. It ensures involvement by other agencies such as health, education and the voluntary sector where this is appropriate. The Framework provides statutory timescales for work to be undertaken with families. The Vale of Glamorgan is fully engaged in national work being done to simplify assessment, planning and reviewing processes for individual cases. It will help to reduce levels of bureaucracy and the disproportionate time spent by staff entering information on to case management systems.
4. Partnership working in the Vale of Glamorgan is strong and effective. At an operational level, there is evidence for this on a daily basis in the management of individual cases across the whole range of need. Strategically, partnership working is demonstrated in the work of groups such as the Children and Young People's Board, the Families First and Flying Start Management Boards, the Cardiff and Vale of Glamorgan

Local Safeguarding Children Board, the Safer Vale Partnership, the Local Service Board, the South-East Wales Improvement Collaborative (with nine other local authorities) and the Integrating Health and Social Care Programme (with Cardiff Council, the Cardiff and Vale University Health Board and third sector umbrella organisations).

5. There is a high and growing level of demand for children and family services. To ensure that this demand can be met and that we can continue to improve the quality of the services available, the Children and Young People Services Commissioning Strategy 2013-18 was introduced. It contains four key strategic objectives:

- **To support families to stay together** and reduce the need for children to be looked after, by ensuring a focus on early intervention and preventative action across all service provision for children.

- **To manage risk confidently and provide support at the 'edge of care'** by making sure that need is accurately assessed, resulting in the right children being accommodated at the right time. This includes supporting families to avoid children becoming accommodated unnecessarily and by making private arrangements within their wider family networks.

- **To provide and commission a flexible and affordable mix of high quality placements** that meets the diverse range of children's needs.

- **To give children clearly planned journeys through care** which remain focused on achieving care plans, prevent drift, enable them to be reunited with family and friends where possible, have stable placements and exit the care system positively.

6. During 2015/16, steps have taken place to commence a review of the Strategy with the intention of implementing a Council-wide corporate strategy in 2016/17.

7. As a consequence of actions to implement the current Strategy, numbers of looked after children have been subject to monthly fluctuation but have remained relatively stable over the year; from 184 at the end of March 2014 to 193 at the end of March 2015. Whilst this represents an overall increase, it is significant to note that this includes an increase in the number of children subject to Orders granted by the Court, but placed either with their parents or within their wider families in kinship placements. Retaining children within their families where it is safe to do so is a priority within the Strategy. The number of children and young people whose names are included on the Child Protection Register has again fluctuated throughout the year dependent on levels of risk. At the beginning of the year there were 87 children whose names were included on the Register compared to 101 at the end of March 2016.

8. We have continued with our strategy to achieve permanence planning for children who are looked after by revoking in appropriate cases Care Orders on children placed at home with parents and supporting Residence Orders and Special Guardianship Orders for children in long term settled placements. While such placements continue to generate financial costs for the Council, the burdens on social worker and independent reviewing officer time and resources lessen as a result and enable other priority areas to be targeted. We have also progressed plans to place children for adoption where this is in their best interests and all alternative options have been exhausted.

During 2015/16, we made three successful applications to Court to revoke Care Orders in favour of Special Guardianship Orders. These children are no longer Looked After and no longer have Social Services intervention in their lives at an inappropriate level.

At the end of year 2015/16, there were 55 children in total who were formerly looked after and are now subject to Child Arrangement Orders, an increase of 24 children over a three-year period. An additional 8 children in 2015/16 were

diverted from requiring care and have been supported financially to remain within their wider families through Child Arrangement Order allowances.

During 2015/16, eight children were adopted and a further thirteen placed for adoption. This compares to eleven children who were adopted in 2014/15 and eight children who were placed for adoption in the same year.

9. We have also continued to focus our efforts on returning children placed out of area to placements within Wales and, where possible, within the Vale of Glamorgan. In March 2016, of the 153 children placed in foster or residential care, only three were placed outside Wales. Each of these is in very specific circumstances where the level of need warrants a specialist placement that is not available in Wales.
10. We have commenced a review of our Commissioning Strategy to ensure it remains relevant and up to date. This work has been positively sponsored by the Council's Corporate Parenting Panel with an intention that it be developed as a Council-wide strategy for children in need of care and support that recognises the shared responsibility of all Council directorates. Completion of this work will be a priority for the Division in 2016/17.
11. The Division has achieved budget savings over the last year. However, placements for children and young people looked after continue to be a source of pressure. Through the Directorate's Budget Programme, we are endeavoring to make the necessary changes to services that will bring about improvement but also ensure that we continue to meet the savings targets set and deliver a balanced budget. This has included the development of a recruitment strategy to increase the number of in-house foster carers and a pilot scheme to inform the potential development of a therapeutic fostering service that will promote placement stability. This strategy has continued to deliver against the targets set for this year. By increasing our ability to place with in-house foster carers, we should reduce our reliance on independent foster placements and promote our

ability to place locally. Over a two year period, the service has recruited 15 additional in-house foster carers.

12. We have been able to maintain staffing levels at the front-line, with a good level of stability amongst the workforce. This includes experienced managers who provide clear leadership to staff teams. We have experienced difficulties in recruiting permanently to posts within the Intake and Family Support Team, but have remained committed to ensuring staffing levels are maintained, where necessary through the employment of temporary staff pending permanent recruitment. We are also reviewing our structures to determine the most appropriate allocation and arrangement of resources at the front door.

13. Significant changes in the past year include:

- continued implementation of the Children and Young People Services Commissioning Strategy 2013-18, alongside work to develop a Corporate Strategy;
- opening of our second commissioned residential provision in the Vale of Glamorgan;
- implementing the Regional Adoption Collaborative;
- reducing the number of children placed in residential care;
- increasing the number of children placed within their wider family in kinship placements.

14. As we have moved closer towards implementation of the Social Services and Well-being (Wales) Act in April 2016, Children and Young People Services alongside its statutory and third sector partners have been preparing for the challenges we will face in ensuring that new requirements can be met. The Act is intended to transform the way social services are delivered through an approach that is focused on achieving the outcomes necessary to promote a person's well-being; as an individual, as part of a family and as part of their community.

15. To achieve this aim, the Act requires us to ensure that people have access to clear information, advice and assistance and that their voice is at the centre of decisions about their care and support. It also emphasises the importance of prevention and early intervention to help people live independently.
16. The regulations and guidance have been published during the year and we have spent time in 2015/16 considering the implications. This task will continue into 2016/17 and it is recognised by Welsh Government that full implementation of the Act will be a journey that develops over time.
17. The ability to meet the need of our most vulnerable children and families at a time when resources are reducing will require the development of alternative service delivery models and re-shaping services through more integrated arrangements.

SAFEGUARDING AND CHILD PROTECTION

18. Social Services have a statutory responsibility to investigate situations where a child or young person may be suffering abuse or neglect or is at risk of suffering abuse or neglect. Whenever it is necessary, we must protect children and young people from harm. While we always endeavour to do this in partnership with families, we sometimes have to take action against the wishes of the parents or wider family.
19. Referrals are received from a number of sources including families themselves, the police, schools, health visitors, GPs, hospitals and members of the public. All referrals are screened to establish priority and need for assessment and the provision of support. The Service has maintained a high level of performance for decisions made within one working day, achieving a rate in excess of 99% for the year. When there are concerns that a child or young person may be at risk of being harmed or neglected, the assessment starts immediately.

20. As stated earlier, the number of children and young people whose names are included on the Child Protection Register has fluctuated. From inspection, audit and quality assurance processes, we know that multi-agency assessments, decision-making and planning are helping to ensure that the most vulnerable children and young people are identified and supported appropriately. The Council continues to demonstrate strong performance in areas such as the timeliness of child protection conferences and initial core group meetings. All children involved in the child protection process are offered an advocate.

These were our improvement priorities for 2015/16 and progress made:

- **We have considered the requirements of the Social Services and Well-being (Wales) Act as they relate to children's safeguarding and reiterated our compliance with the All Wales Child Protection Procedures to ensure our responsibilities to children in the Vale of Glamorgan are met.**
- **We have improved our awareness of child exploitation rates by developing baseline data to inform a strategy for early intervention. In doing so, we will promote the wellbeing of children and young people who experience, or are at risk of, sexual exploitation.**

These are our improvement priorities for 2016/17:

- **To continue to develop the programme for the Regional Children's Safeguarding Board, including the implementation of the agreed programme of work for integrating Children and Family Services across the region, overseen by the LSCB Executive.**
- **To develop a child sexual exploitation strategy for the Vale of Glamorgan that appropriately engages all relevant parties.**

CHILDREN IN NEED

21. Our aim is to support children and young people so that they continue to live within their own family networks and within their community wherever this is possible. We intervene when it has been assessed that there are risks to children and young people, to prevent those risks escalating and to safeguard those children who have suffered or are likely to suffer significant harm. In order to achieve our aims, we work in close partnership with other agencies and service providers to offer a range of family supports to meet assessed needs. We ensure priority is given to those children, young people and families in greatest need to ensure the services are used most effectively and efficiently.

22. The focus on prevention and earlier intervention is a key part of the efforts of the Council and its partners to change the way in which services meet need. This model will be reinforced further through the requirements of the Social Services and Well-being (Wales) Act which will be implemented from 6th April, 2016. The Council assessed its readiness for the Act and developed an implementation plan. We are also reviewing our Commissioning Strategy which contains an analysis of the need for services to ensure we are focusing the provision of resources in the right way.

23. The Families First Management Board takes responsibility for allocation of the Families First grant funding, to ensure that the services commissioned are targeted at those children and families who may be harder to reach and so more vulnerable. The Board has been actively considering the implications of the Social Services and Well-being (Wales) Act and changes that may be required to the allocation of Families First grant funding. This has included the benefit of an independent review of Families First commissioned by the Board. Given that the Board has also had to respond to a reduction in Welsh Government funding for Families First in 2016/17, our ability to ensure best value and to protect frontline provision has been key.

24. A fundamental part of this spectrum of services is the Families Achieving Change Together (FACT) Team. It plays a critical role in supporting children and young people to remain living within their family networks and in minimising the need for more intrusive and costly intervention. 258 referrals were received across the Vale of Glamorgan in 2015/16, leading to 82 assessments. 92 families were signposted to alternative services. The project successfully ended involvement with 64 families.

25. The following case study provides an example of the work undertaken by the FACT team:

Case example – FACT:

B was referred to the service by her SENCO (Special Educational Needs Coordinator) in July 2015 who was concerned about C (mother) managing B over the summer break and a need for 'respite'. The referral highlighted the following concerns:

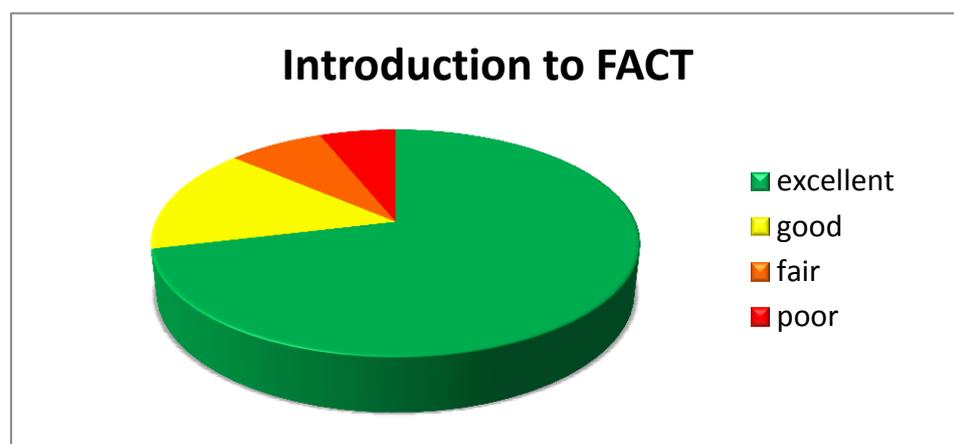
- ***C suffered a brain hemorrhage in September 2013 resulting in significant difficulties with fatigue, mood regulation, planning and crisis management.***
- ***Attachment issues, close but volatile relationship.***
- ***Financial hardship.***
- ***Insecure housing.***
- ***Health issues.***
- ***Issues and confidence and low self-esteem – B.***

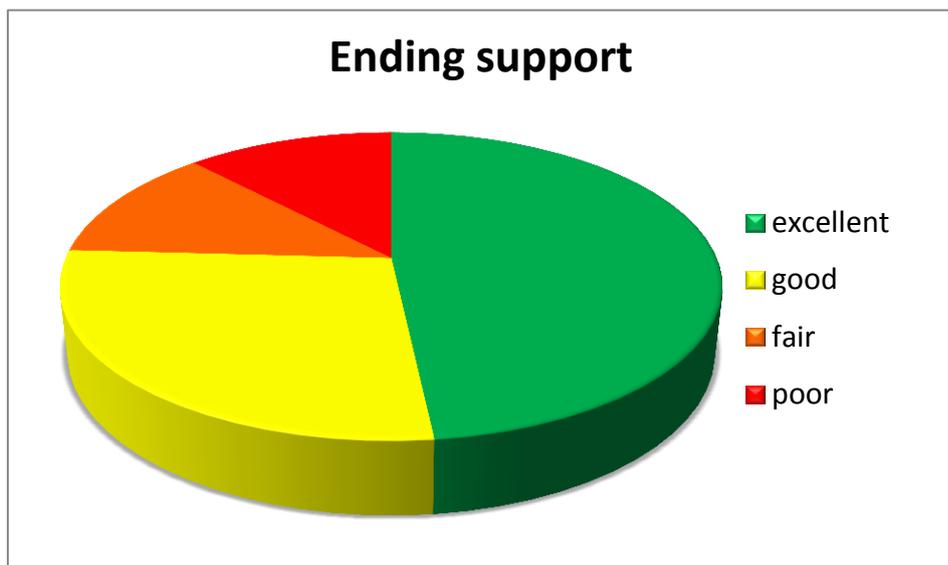
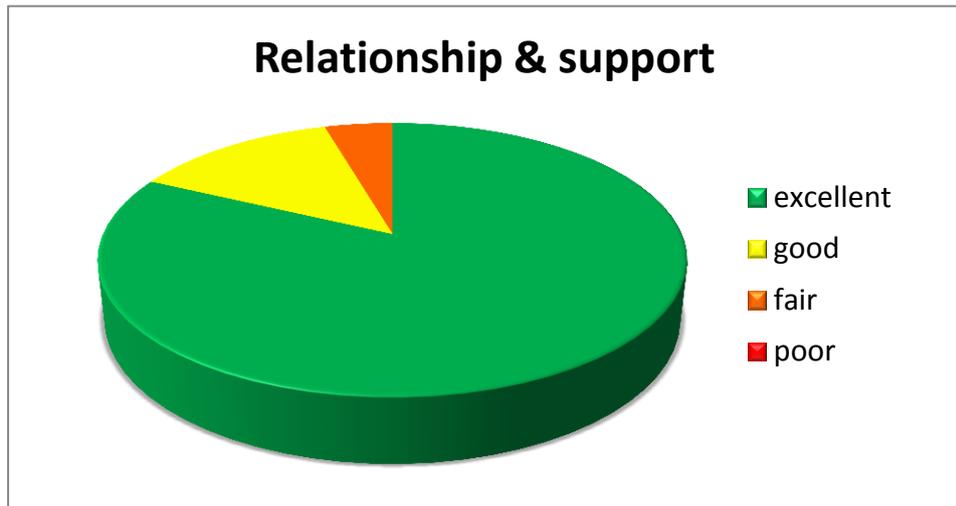
A plan was developed focusing on the following:

- ***An application for an assisted place in holiday club was initiated.***
- ***A food parcel was provided to the family on two occasions where there was no food in the house due to lack of money.***
- ***A referral was made to the Citizen's Advice Bureau to provide financial and benefit advice.***
- ***Engagement of father, with regular contact established.***
- ***Referral to Supporting People for tenancy support.***
- ***Support to B in school.***
- ***Completion of a parenting programme.***

At closure (May 2015), C reported being much more confident managing B's behaviour and her own life, and there appeared to be significant improvement in these areas. The family had also been signposted to services to ensure follow on support. The school noted that they had not only seen a very positive change in B's behaviour, but also C's.

26. A feedback event was held in June 2015 for service users who were open to FACT, received support and were closed to the Service in the previous 6 months. The aim of the event was to gather the views and opinions of young people and parents with regards to the service they have received. The following charts reflect the feedback provided by recipients of the Service:





27. The Service has been able to use the feedback gleaned from this event to enhance its delivery and to implement service improvements.

28. Demand for the FACT service has remained constant, together with a rise in the complexity of referrals being made. This is a common experience across other Teams around the Family service models in Wales. Locally, the Vale of Glamorgan has undertaken a review of the Vale of Glamorgan's Resource Panel, which receives referrals at Tier 2 of the Integrated Service Model and cases that are on the edge of more

intensive interventions from statutory services, in order to consider how we can most effectively respond to levels of need. This has resulted in the development of a pilot project to implement an advice line that receives and responds to both professional and self-referrals. This has involved continued discussions with partners in both the Family Information Service and the Intake and Family Support Team to support the management of enquiries.

29. Under the Children and Families (Wales) Measure 2010, local authorities and the NHS have a joint statutory responsibility for ensuring delivery of an Integrated Family Support Service (IFSS) in their area. The Vale of Glamorgan and Cardiff IFSS has been operational since the end of February 2012 and has five principal functions:

- Undertaking intensive direct work with families through the application of time-limited, family focused interventions.
- Providing advice and consultancy to practitioners and agencies on engaging complex families with parental substance misuse.
- Working jointly with the case managers and others to ensure that the family can gain access to the services they need.
- Spot-purchasing services not otherwise available.
- Providing training on evidence-based interventions for the wider workforce.

30. The IFSS aimed to receive at least 84 referrals during the year and planned to work with 70 families in 2015/16. They exceeded this by receiving 137 referrals and working with 93 families; 71 in Cardiff and 22 in the Vale of Glamorgan. This is a significant increase compared to the previous year where IFSS worked with 36 families, 26 in Cardiff and 10 in the Vale of Glamorgan.

31. The Annual Report 2015/16 demonstrates the robust system of data collection and analysis in place to demonstrate how families are referred and prioritised for support, and the impact upon key areas of wellbeing such as education, parenting, relationships, alcohol or drug cessation.

This data is complemented by qualitative evaluation through service user and referrer feedback. The results demonstrate that the role taken by IFSS in strengthening services to support some of the most disadvantaged children who are in need or at risk because of parental alcohol or drug dependence.

32. The results include analysis of goal attainment. The IFSS works with families to create clear, measurable and attainable goals in line with the referring social worker's expectation for outcomes of the intervention to ensure the children's safety. Families will generally work towards an average of two goals of which at least one will focus on reducing/stopping problematic substance misuse. The aim is to achieve a success rate of 75% of goals achieving a score of '0' or higher.

33. The main priorities for the year ahead include increasing the number of referrals worked with by intervention specialists. Priority will also be given to training the wider workforce in the IFSS model, including housing associations and their housing support teams. At a local level, there are plans to strengthen the maintenance phase that follows IFSS intensive intervention and to embed the system for formal review of cases. In addition, the IFSS Board will continue to plan the structure and pattern of future service delivery and identify funding for the medium to long term.

34. The Flying Start programme, funded by Welsh Government, continues to offer a service to 1,200 children and their families in 17 Lower Super Output Areas across a total of six wards (Gibbonsdown, Court, Cadoc, Castleland, Buttrills and Illtyd) in the Barry area. Hosted by the Vale of Glamorgan Council, the programme aims to bring about sustained positive changes and improved outcomes in language, cognitive, social and emotional development and the physical health of children and their families through the early identification of needs and provision of early intervention through one-to-one support for parents/carers and their children from a multi-agency, multi-disciplinary team to address issues that negatively impact on the health and well-being of the family.

35. The core service comprises of intensive health visiting, free childcare, the promotion of positive parenting and the promotion of speech, language and communication skills

36. In 2015-16 Flying Start provision included:

- 278 packages* of enhanced Parenting Support (1:1 in the home)
- 312 packages* of enhanced Early Language/Play Support (1:1 in the home)
- 280 childcare places provided for children aged 2-3 years;
- Around 15 weekly opportunities for families to access groups, clinics and open access play sessions.

37. A *package of care refers to a minimum of 4 dedicated sessions, needs based intervention.

38. Feedback from families, detailed below, highlights how children are benefitting from the services offered.

Feedback from families regarding Early Years input

How do you feel your child has benefited from the sessions?

- *“She has been able to express herself more by painting and other activities”.*
- *“Lots of exploring and hopefully starting to learn to share”.*
- *“To listen, feel, smell. Different shapes and sounds”.*
- *“Language development, play times and new activities to play with”.*
- *“My son has learnt a lot and really enjoyed himself”.*

- *“Lots of new things with touch and co-ordination. Gave me some ideas to use in the house”.*
- *“ (My daughter) has come on so much”.*
- *“She has become more confident at trying new things”.*
- *‘She is talking so much more now.’*

How do you feel you have benefited from these sessions?

- *“All the ideas we have been shown and it’s things that can be made with everyday household goods”.*
- *“The ideas and the way I play with [my daughter] and the baby massage that I use most days was excellent as I was doing it completely different”.*
- *“New ideas, time dedicated to play and watching my son develop and learn”.*
- *“I have benefitted by learning new ways of being able to play with [my daughter] and not just with toys. They have given me some really good ideas of how I can interact more with [her]”.*
- *“Jelly play, massage, facial expressions. Some things me and my partner would have never have thought of”.*
- *“It helped me bond/interact with [my baby] a little bit more. I have more activities to do with my little boy”.*
- *“It has given me confidence that I am doing a good job. Given me new ideas for things I can try with [my daughter]”.*

Flying Start – case example :

A, a young parent, lives in privately rented accommodation with her two children and her partner and works part time as a home carer.

During an introduction visit a parenting worker observed A struggling to manage her 2 year old son's behaviour. He was displaying typical behaviour for his age and stage of development - temper tantrum, snatching. The mother shared that she felt a failure as a mother and used dated methods of discipline during the visit such as shouting at her son and putting him on the naughty step. The mother shared that she felt that the child's behaviour was impacting on her relationship with her partner and her feelings towards her son. Although keen to attend the nurturing programme A doubted anything could possibly change how her son was behaving and that she would never change her mind about using smacking and the naughty step.

A attended all ten weekly sessions of the nurturing programme and with her partner diligently tried out the family practice tasks. Despite her initial doubt that anything could change A embraced the programme fully and threw herself whole heartedly into each and every new idea and approach.

Today, the parents are more confident and work as a team with their parenting, using the new strategies they have learnt they have found they can manage their children's behaviour in a calm and positive way and home life is happier and stable.

These are our improvement priorities for 2016/17:

- **Appointment with of a Health and Wellbeing Social Worker in partnership with Communities First to promote early identification**

and early intervention with regard issues impacting on the mental health of parents/carers of young families.

- **Development of resources and support in partnership with School Improvement Service to promote early speech, language and communication skills of young children in catchment nursery schools.**

39. Families First funding and Carers Services funding continues to combine to provide a Vale Young Carers Project. The service offers young carers an opportunity to take a break from their care giving role and to meet other young people in similar situations. The Project, run by Cardiff YMCA, also provides one-to-one support, including support for young carers to improve their educational attendance and attainment.

40. During 2015-16, 50 young carers accessed the Project and 15 of these received one to one support in the home. Evaluations show an 87% positive feedback for the informal respite. 61% of young carers stated that accessing the programme had improved at least one aspect of their life.

41. Performance has been maintained in 2015/16 with 100% of young carers known to the Council being assessed. Our performance for those who were assessed receiving a service has also continued to achieve 100%.

42. The case study below illustrates how the Vale's project for young carers facilitates positive outcomes through its 1 to 1 support :

Case example – Young Carers Project:

1-2-1 support has been provided to M once a week at School. Mum has a personality disorder and struggles with substance misuse. The support being given to M is for emotional support as M refused to work with other agencies and found it difficult to deal with home life and the role of a young carer.

M has difficulty in letting go of past experiences that are negative and would regularly get upset about these experiences and re live the anger. The Young Carers Project Worker decided to build a 'life journey' map to map out all the negative and positive experiences and memories in M's life and put them along a road to show the journey. These were used at the beginning of every session to discuss any new experiences M wanted to add.

This has enabled M to realise the negative experiences happened in the past, and helped M recognise that they weren't happening now. The young carer could move on and feel better about their situation. School has seen improvements in M's behaviour and M is not dwelling on the past but looking into the future more positively. There is a visible improvement in M's emotional development. M is now coming out on group respite activities and able to enjoy company from other young carers.

43. The timely completion of both Initial and Core Assessments is critical to ensuring appropriate support and services are provided to children and families 'in need'. Initial Assessments should be completed within seven working days and our performance has increased to 90% for 2015/16. Completion of Core Assessments within the recommended 35 working days has further improved to 92% in 2015/16.

These were our improvement priorities for 2015/16 and progress made.

- **We have reviewed the Resource Panel and implemented a more effective mechanism for responding to need and effectively signposting families to the right services at the right time. This advice line has been piloted during 2015/16 with the intention it continue into 2016/17.**
- **We have completed the 2015 expansion phase for Flying Start delivering targeted services to eligible families in their communities.**

- **We have reviewed the Commissioning Strategy, in the context of the requirements of the Social Services and Well-being (Wales) Act, to ensure it continues to provide an appropriate focus on the needs of children and their families and makes best use of our resources in meeting those needs. The Strategy is now being developed as a Corporate Strategy engaging all Council directorates.**
- **We have reviewed the use of Families First funding, in the context of the requirements of the Social Services and Well-being (Wales) Act, to ensure our priorities are appropriately targeted and services are delivered effectively to families. This has included the need to respond to a 12% reduction in Welsh Government funding for 2016/17.**

These are our improvement priorities for 2016/17:

- **We will implement a Corporate Strategy for children who need care and support.**
- **We will continue to consider fully the implications of the Social Services and Well-being (Wales) Act as they relate to children in need of care and support and improve our ability to respond to these changes.**

LOOKED AFTER CHILDREN

44. The most common reasons for children and young people becoming looked after continue to be abuse and neglect but, as a result of case law decisions, there are also a growing number of homeless 16/17 year old young people who are being accommodated by the Council.

45. Our continued engagement with children and young people looked after tells us that:

- they appreciate having one social worker who remains consistent;
- need age appropriate information to enable them to understand why they are looked after; and
- value opportunities to be involved in decisions that affect them.

46. The cross-party Corporate Parenting Panel, chaired by the Cabinet Member for Children's Services and Schools, actively considers issues affecting looked after children. It emphasises the collective responsibility of the whole Council, in conjunction with all statutory and non-statutory bodies, to contribute to raising standards. Examples of topics explored by the Panel during 2015/16 include sponsoring the development of a Council-wide Corporate Strategy for children who need care and support, the educational attainment of looked after children, and developments in relation to the implementation of our Regional Adoption Collaborative.

47. All requests for placements are scrutinised by Divisional Managers at the weekly, multi-agency Placement Panel. This ensures that, in all cases, local authority accommodation is being used appropriately to safeguard children and young people. It also helps staff to identify the kind of responsive and effective services that might be introduced earlier in order to support children and young people to remain within their family networks. The Children and Young People Services Commissioning Strategy provides the framework to ensure targeted support is provided to the right children and young people at the right time. This Strategy is being reviewed to ensure that it remains relevant and up to date, and will be enhanced via the implementation of a Corporate Strategy in 2016/17.

48. The number of children and young people being looked after by the Council can fluctuate on a daily basis, and during this year has increased slightly from 184 at the end of March 2015 to 193 at the end of March 2016. It is important to note that this increase is largely due to the number of children that whilst subject to Orders granted by the Court and therefore looked after, remain living with the parents or wider families in kinship placements. In March 2015 there were 29 kinship placements and 13 placement with parent arrangements, compared with March 2016

where the numbers increased to 44 kinship placements and 24 placement with parent arrangements. Our ability to support children to remain with, or to return safely to, their families is one of the key principles within our Commissioning Strategy. Additionally, we prioritise the following:

- The revocation of Care Orders for children and young people who have been placed at home with their parents where it is assessed as being safe to do so.
- Supporting long-term foster carers and kinship carers to seek Residence Orders or Special Guardianship Orders for children and young people who have been in stable placements.
- Establishing a formal Permanency Panel where all care planning for looked after children can be considered before the second statutory review, i.e. within four months of becoming looked after.

49. These planned changes of placement can have an impact on the percentage of children experiencing three or more placements in a year, and during 2015/16 our performance in this area has decreased slightly from 7% to 9%. This is due in part to our efforts to return children to the local area or to their parents and wider families. We continue to monitor this figure closely to ensure we minimise unplanned changes of placement for children.

50. There is considerable evidence that looked after children and young people in the Vale of Glamorgan are receiving timely support and quality services. Every looked after child has an allocated Social Worker. 96% of statutory visits to children in their placements are achieved on time and reasons for the remaining 4% are agreed by a Manager and recorded. 94% of all Care Plans are reviewed within timescale and again reasons for the remaining 6% are agreed with managers and recorded.

51. Considerable work was undertaken during 2013/14 to further enhance the Personal Education Plan (PEP) process, which captures the attainment of a looked after child and identifies the need for any additional support. The benefits of this work have been realised during 2014/15. The new

guidance and the format for PEPs were drafted in collaboration with children, schools and Social Services. The process is more robust and carefully tracks the attainment of the child. It is now an accumulative document, incorporating the education history of the pupil as well as other information which is useful to schools and other educational settings. With the implementation of the new arrangements since January 2014, performance in 2015/16 has improved considerably to 98% of PEPs being completed within the required 20 days.

52. Children and young people benefit from the additional support offered by the Children First Team which comprises a Specialist Teacher, part-time Educational Psychologist and LAC Clinical Nurse Specialist. We have continued to work closely with the Cardiff and the Vale University Health Board during 2015/16 to promote the percentage of looked after children receiving a health assessment. This work has seen an improvement in performance from 63% in 2014/15 to 68% in 2015/16. We are aware that performance in this area however remains below the Welsh average of 81% and we will maintain a commitment to further improvement.
53. This year has seen significant progress being made in the development of services for children with mental health needs. Historically, there have been concerns about the extent to which the Child and Adult Mental Health Service (CAMHS) across Wales has been able to meet the need for help. Problems in delivering an effective CAMHS service model have been long-standing and there have been serious adverse consequences for children and families in the Vale, including those for whom the Council has a direct responsibility.
54. Further to a significant investment by Welsh Government this year, the Cardiff and Vale University Health Board has been working closely with its partners to develop models to enhance the delivery of emotional well-being services via a number by a number of related projects. These services including a neurodevelopmental disorder service, an emotional wellbeing service, a mental health crisis intervention service, a primary mental health support service and a first episode psychosis service will be

launched during quarter one of 2016/17. Children and Young People Services will continue to work closely with the Health Board to monitor the impact of these service developments and to ensure they deliver improved outcomes for children and young people.

55. Additionally, Children and Young People Services have implemented a therapeutic fostering pilot during this year that will inform the potential for this to become a substantive part of the Fostering Service. Through the temporary employment of a psychotherapist and two dedicated social care officers, the pilot scheme is working alongside social workers and foster carers to reduce placement disruption and to enable, where possible, step down from more costly placement options in a planned way where this is appropriate for individual children.
56. We aim to place all children within their local communities so that links are maintained with family, school and friends. We need to recruit more foster carers who are able to provide placements for older children and teenagers and children with health and disability needs. We have also recognised this year the need to expand our ability to respond to the demand for parent and child foster placements.
57. To increase the availability and range of local placements, the foster carer recruitment strategy was introduced in 2013/14. The target to recruit eight mainstream foster carers during 2015/16 was not met, although six new mainstream carers were recruited. This was due partly to assessments that did not progress to approval, but also to the significant increase in new kinship carers approved during the year; 15 in 2015/16 compared to 4 in 2014/15. This is a positive placement outcome for children who would otherwise require the provision of mainstream foster carers.
58. We have also actively involved our foster carers in providing community support to families that supports rehabilitation or enables families to remain together. This is an example of where we seek to use our resources creatively, in this case to benefit from the wealth of experience

amongst our foster carers, several of whom have received long service awards this year.

59. During our annual fostering inspection undertaken by CSSIW this year, the following positives were highlighted:

- the service is effectively managed and a new manager is in place;
- the service is child centered with motivated staff;
- the service has good systems for consultation and quality assurance;
- the service provides good support and guidance to foster carers; and
- is responsive to addressing issues raised by inspections or audits.

60. “Overall we found that children and young people benefit from being cared for by carers who are motivated and promote the physical, emotional and social development of the children placed with them. Children can feel confident in the care they receive because the foster carers are offered good support, supervision and training”.

61. As part of the South East Wales Improvement Collaborative (SEWIC) and its Children’s Commissioning Consortium Cymru (the 4Cs), we are engaged in regional commissioning of externally managed children’s placements. By collectively negotiating fees with independent sector providers through this unit, all the local authorities have been able to achieve cost savings and improve service quality.

62. The Council is also engaged in National Fostering Framework which is one of the four major key work streams within the programme which has been established by the strategic steering group set up by Welsh Government with the task of improving outcomes for children. The aims of the National Fostering Framework is to improve permanency planning for children and quality of placement provision, consistent use of best practice models for recruitment and supporting carers and an increase in collaboration and cooperation by all key stakeholders.

63. The number of young people requiring mainstream residential care placements has reduced during the year from 20 to 13, with a further two young people whose plans are to move on to more independent settings in 2016/17. Although demand has not increased, we continue to experience difficulty in securing specialist residential placements for a small number of young people with complex and challenging behaviours and disabled children.
64. The Council carried out an exercise to tender residential care provision from the independent sector. The service specification included provision of smaller units of accommodation to offer a wider range of placement options. The first of the three residential units opened in December 2014, and the second during this year. Similarly, we recognise the need to provide additional support to foster carers dealing with increasingly challenging children and young people and have implemented a pilot to explore the benefits of a therapeutic fostering scheme.
65. In response to the Welsh Government's Social Services and Well-being (Wales) Act and as part of the local government commitment to establishing a National Adoption Service, the Council led the work to prepare for the creation of our regional adoption collaborative that went live on 1st June 2015. Our region includes the local authorities within the two Health Board areas of Cardiff and Vale of Glamorgan and Cwm Taf. We have taken opportunities to work more closely with the voluntary adoption agencies and to further enhance relationships with Education and Health in the interests of adopted children. The Voluntary Adoption Agencies, Education and Health are each represented on the Collaborative's Management Board.
66. The level of demand for the service has remained high. The Collaborative receives a large number of enquiries from prospective adopters (202 in 2015-16) and has received a significant number of referrals of children requiring an adoption placement (132 from 1 June 2015 to 31 March 2016). These areas have been prioritised in terms of service delivery to reduce delay and ensure that timely placements for children requiring

adoption can be made. The service has also seen a sharp growth in the number of referrals for Adoption Support services (51 from 1 June 2015 to 31 March 2016) which is a considerable increase on previous years and which is posing challenges in terms of delivery. Some short term proposals have therefore been agreed to address the backlog of work in this area.

67. Performance monitoring and maintenance is a key priority for the National Adoption Service (NAS) and the Collaborative. The Collaborative reports against a range of nationally agreed performance indicators on a quarterly basis. During 2015-16 the Collaborative placed 70 children for adoption and although this represents some reduction to the previous year, this also reflects the overall national downturn in the numbers being placed for adoption. The service has improved performance in respect of the timeliness of the adoption process for children and in the numbers waiting for adoptive placements. The Collaborative has also performed well in respect of the approval of adopters, approving per head, 109 adopters in the past year. Assessments of prospective adopters were completed well within the national timeframe.
68. Improvements have also been made to the birth parent counselling service and actions are being put in place to address the shortfall in respect of those performance indicators which remain the responsibility of the individual local authority, namely the provision of Later Life material for children placed for adoption.
69. The establishment of the Collaborative has represented a significant organisational change to the way adoption services were formerly delivered, which has created challenges but also provided opportunities to develop services differently. Collaborative working is now beginning to show benefits in terms of providing a clearer picture of need and resource, highlighting areas of deficit. The priority for the Collaborative in the coming year is therefore to build upon what has been achieved to date and to further develop the service to ensure that performance levels are maintained and enhanced in those key areas.

70. All young people leaving care have an allocated case worker and access to a Young Person's Advisor, although a small number of young people choose not to use the support available. Pathway Plans continue to be in place in all cases. The Council has a good record of supporting young people into Further and Higher Education.

Educational achievement of some of our young people leaving care:

One young person will be qualifying as a teacher during 2016. Another young person has finished his degree in music technology. Ten young people are at university undertaking degree courses and a number are undertaking A levels. One young person has secured a place at university to study Ecology.

71. The needs of all homeless young people aged 16–18 years are assessed by Social Services in partnership with the Housing Department and Llamau, a third sector provider. We work actively to provide appropriate support.

72. As a Council, we are aware of the increasing demand for accommodation by young people presenting as homeless and also how this adversely affects the options available for young people leaving care and preparing for independence.

73. During 2013/14, we cooperated with a private landlord to put in place a scheme which provides accommodation for four young people who possess sufficient independent living skills to care for their own room and prepare food, but who are not yet able to manage adequately the demands of their own tenancy. We have maintained our commitment to this initiative which has enabled us to increase our range of accommodation options for young people and to release higher-level supported accommodation for our more vulnerable 16-18 year olds.

74. During 2014/15, we increased our numbers of supported accommodation beds for young people 16 – 25 years of age by six beds following the opening of Ty Newydd in August 2014. This increase has been maintained in 2015/16. Additionally, we have implemented the Welsh Government's 'When I'm Ready' scheme which enables young people to remain with their foster carers post 18. We currently have 12 young people living in 'When I'm Ready' arrangements with a further seven potential placements identified for 2016/17.

These were our improvement priorities for 2015/16 and the progress made:

- **We have further increased the rate of care leavers who are in employment, education or training from to 57% in 2014/15 to 61.9% in 2015/16.**
- **We have continued to focus on the sustainability and stability of looked after children and young people's placements.**
- **We have maintained fostering recruitment activity of mainstream and kinship carers. Although we did not achieve the target set within our Foster Carer Recruitment Strategy for mainstream carers, we have trebled the number of kinship assessments.**
- **We have not increased the number of placements with Independent Fostering Agencies.**
- **We have effectively utilised the placements at our newly commissioned residential provision, including the retention of a bed for use in emergency placement situations.**
- **We have supported Cardiff and Vale University Health Board in developing service models to address deficits in the provision of**

CAMHS and make best use of Welsh Government investment in this area of need.

- **We have implemented the Vale, Valleys and Cardiff Regional Adoption Collaborative and co-located staff centrally to the region.**

These are our improvement priorities for 2016/17:

- **We will finalise our Corporate Strategy for children in need of care and support and seek Cabinet approval.**
- **We will continue to implement the Social Services and Well-being (Wales) Act as it relates to looked after children and improve our ability to respond to these changes.**
- **We will conclude the pilot of our therapeutic fostering scheme and undertake a thorough cost/benefit analysis.**
- **We will continue to explore fully all opportunities to reduce our LAC population, including changes to the range and provision of family support services. This will include implementing a pilot direct family support plus service and undertaking a thorough cost/benefit analysis.**

CHILD HEALTH AND DISABILITIES

75. The Child Health and Disability Team work to provide appropriate support to families, helping disabled children and young people to achieve their potential. This includes supporting social inclusion and enabling them to gain skills that will enhance their independence.
76. Services include a range of short breaks, leisure provision and sessional support, overnight and holiday breaks with approved foster carers or at our purpose-built residential provision (Ty Robin Goch). These services are provided in partnership with Action for Children and Barnardos. In addition, families may receive Direct Payments, where they are given financial support which they use to fund choices about how best to meet their children's needs. Holiday play schemes support disabled children and young people; in addition, Social Services provide specialist support.
77. Children and families are regularly given information and advice on how to access the range of benefits and services available to them. The high quality Disability Index newsletter is distributed on a quarterly basis to all families and aims to ensure each publication is packed full of articles about events, play schemes and new opportunities. A publicly accessible web-site contains news on all the latest developments in services and support.
78. Short breaks provide invaluable support for disabled children and young people and their families. They offer opportunities for children to become more independent, widen their experiences and form real friendships outside their family. At the same time, their families get a break from the caring role. Resource pressures mean that all care packages are regularly reviewed across all service areas to ensure equity of provision to disabled children and their families.
79. There is evidence of increasing demand for support for older disabled children and young people. Families often manage to cope when children

are younger but some of them find it increasingly tiring and stressful as the children grow and may become more challenging. A small number of disabled young people require 24 hour care and support, needs which can be met only in a residential school setting, usually until they reach the age of 19. This represents a significant long-term pressure on social care, health and education resources in coming years as the cost of such provision is extremely high. At the end of 2015/16, there were five children in such settings, plus four currently under the age of ten years old who are likely to require this provision in the future due to the complexity of their needs.

80. Strategic social care and health partners in the Vale of Glamorgan and Cardiff commissioned an independent review of services provided to disabled children and young people and their families. This was to help them to consider opportunities to integrate health, social care and special educational needs provision where there are potential benefits for children.

81. To help take forward this work, the statutory agencies pooled resources to create a change manager post. The change manager has been in post since October 2015 with the work focused on improving integration of services across social care and health, children and adults, public and third sector, and maximising opportunities for collaboration and joint commissioning of services across Cardiff and the Vale of Glamorgan.

These were our improvement priorities for 2015/16 and the progress made:

- We have continued to work with Cardiff Council and Cardiff and Vale University Health Board on joint agreed priorities, including specialist equipment and continuing health care protocols.
- We have made some limited progress around further scoping the model of residential and respite provision at Ty Deri on the site of Ysgol y Deri, and this work remains a priority for 2016/17.

- We have concluded an extensive review of the transition policy to ensure that children moving on from receiving support from the Child Health and Disability Team at age 18 experience improved continuity of support and services according to their needs from Adult Services.
- We are actively considering the changes we need to make to the assessment of need and provision of care and support through the implementation of the Social Services and Well-being Act in order to deliver more outcome focused, child and family centred services, offering the right help at the right time.

These are our improvement priorities for 2016/17:

- We will work with Cardiff Council and Cardiff and Vale University Health Board to increase the transparency of the continuing health care process and seek local authority membership of the panel.
- We will continue to implement the changes we need to make to the assessment of need and provision of care and support through the implementation of the Social Services and Well-being Act.
- We will work alongside colleagues in Education and Cardiff Children's Services to agree the model of service and commissioning priorities for Ty Deri.
- We will work closely with the change manager, Adult Services, Cardiff Council and the Cardiff and Vale University Health Board to identify areas of need and demand for services, and to develop specifications for the delivery of services and support that make maximum use of the grant funding opportunities recently afforded by the Welsh Government's Integrated Care Fund.

- We will implement the revised transition policy and protocol and monitor its effectiveness via the multi-agency Transition Improvement Group.

YOUTH OFFENDING SERVICE

82. As part of its prevention service, the Youth Offending Service (YOS) works with children and young people from the age of 8 to 18 years at risk of involvement in offending. These young people have not committed offences and the aim of the Service is to address risks and identified needs to prevent them from entering the Youth Justice System. The YOS delivers diversion interventions in partnership with Media Academy Cardiff, Cardiff YOS and South Wales Police to children and young people who have offended for the first time and admit the offence, to divert them from continued offending through Triage and diversion interventions. Prevention and diversion now make up approximately 50% of the overall YOS caseload.

83. The YOS pre and post Court functions are to assess, supervise, plan and deliver interventions to children and young people both in the community (i.e. subject to Out of Court Disposals, Court Orders) and in custody. The aim of the service is to:

- prevent offending and reoffending;
- reduce the use of custody;
- promote and safeguard the wellbeing of children and young people;
and
- manage risk and protect the public from harm.

84. In order to achieve these aims and to divert young people from criminality and anti-social behaviour, the YOS provides restorative justice for victims, reparation to individuals and the community, parenting groups and support, careers and education support, accommodation assistance, access to health interventions and substance misuse education and

treatment. By working closely with partner agencies, the YOS aims to ensure that children and young people with identified needs can access mainstream services.

85. Each year the YOS is required by HM Probation Inspectorate to carry out Viewpoint surveys with young people involved with the YOS. Service users own views regarding their needs, the support provided through the YOS and the progress made is captured. At the end of each period HMI Probation provide analysis of the surveys completed alongside an average comparator. The data is also used by the inspectorate to help determine the priority areas for inspection.

86. Esurvey results from 2015/16 were that 100% of young people surveyed felt that the induction to the YOS was fully explained and areas of offending were explored including reasoning behind the offence and methods to stop reoffending. 90% of young people surveyed felt that their views were taken seriously and all young people felt safe whilst in contact with the YOS.

87. These were our improvement priorities for 2015/16 and the progress made:

- Due to capacity issues, the YOS was not in a position to utilise the YJB Live Re-offending Tracker Tool during the period. However, the YOS has implemented and/or completed a range of activities identified within the Reducing Re-offending Action Plan and has seen a reduction in both the binary and frequency rate for re-offending. The most recent performance data reports on the cohorts for July 2013 – June 2014 and compares it with July 2012 – June 2013. This allows for 12 month tracking period and up to 6 months for the offences to be processed via the Court. The binary rate is 41.9% in comparison to the South Wales rate of 43.6% and is an improvement from previous cohort of 44.2%.* The frequency rate is 1.05 compared to the South Wales rate of 1.32 and again an improvement from previous cohort of 1.54. Re-offences

per re-offenders after 12 months is 2.50 compared to the South Wales figure of 3.03, and has improved from the previous cohort of 3.48.

**Good Performance is typified by a low percentage*

***Good Performance is typified by a low rate*

- The majority of actions identified within the Custody Action Plan have been implemented, including the introduction of reviews of young people's Orders to promote compliance, breach and compliance panels and a revision to the conclusions and recommendations within Pre Sentence Reports for the Court. The YOS has seen a reduction in the use of custody from 0.49 – 0.25 rate per 1,000 of 10-17 year olds. As a result of the positive performance now being achieved, the YJB has highlighted the area of work as effective practice.

**Good performance is typified by a low rate*

- During 2015/16, the YOS has implemented early practice change tools in relation to speech, language and communication, health and emotional wellbeing. The Health Board has delivered training to practitioners to increase their understanding of diversity issues in these areas. Foundation training for Assetplus has been delivered. Unfortunately, there has been a delay in completing the full Assetplus training due to capacity issues, but it is anticipated that this will be completed during July 2016 with the new assessment model being introduced by September 2016.

88. These are our improvement priorities for 2015/16:

89. Work collaboratively with Children and Young People Services in relation to implementation of the Social Services and Well-being Act 2016 and how the YOS fits into the Act's workstreams in relation to prevention, children in need of care and support, looked after children and children in the secure estate.

90. Implement the Assetplus Assessment Framework. Deliver Assetplus assessment training and introduce practice changes associated with the new assessment model. Revise YOS policies and procedures to reflect the changes in practices with a focus on reducing re-offending and promoting the safety and well-being of children and young people.