PURPOSE

1. To seek approval of the development of additional residential child care services and approval of the costs associated with implementing an intensive foster care service.

BACKGROUND

2. The Council has made a strong commitment to fulfilling our corporate parenting responsibilities for looked after children. This has included plans to ensure that appropriate accommodation and care is made available to children and young people who require to be accommodated. A considerable amount of work has been undertaken, over the last 18 months or so, on establishing our needs and requirements, and having considered various options to develop our residential houses we are now seeking to expand our resources to provide greater flexibility, capacity and variety of care settings to meet the varied needs of our accommodated children and young people.

3. The Council’s capital investment in the building and redesign of all three Children’s Houses was completed in 2011, and in the context of the Transformation Plan, the Council has made a commitment to transforming residential child care with a view to achieving the following outcomes:

   - Increased safety and security;
   - Improved health and wellbeing for young people;
   - Increased placement choice;
   - Increased flexibility; and
   - Decreased use of external resources.

4. Our three existing children’s houses have blended in well within their communities, and generally have enjoyed positive community relations. When difficulties have arisen, it tends to be associated with specific behavioural challenges being presented by young people who are traumatised by the neglect and abuse which they have experienced.

5. The Council’s Transformation Strategy 2012-2017 set out to ensure sustainability of services in the face of significant financial challenge with a focus on:

   - Improved outcomes;
   - Services built around people and communities;
   - Preventable spend and early intervention;
   - Alternative delivery models; and
   - Organisational development.
To achieve this within our own residential child care, it was recognised that existing services required to evidence maximum effectiveness and efficiency, while work also required to be undertaken in developing alternative support models to improve outcomes for children by supporting them in East Ayrshire, and reducing costs by avoiding placements in externally provided resources.

The Council’s Transformation Strategy 2012-17 has 3 priorities and under “raise educational attainment and equip our young people for the world of work” the following points have clear linkage to the development of additional residential child care services:

- Raise educational and skills attainment; and
- Foster and grow the partnership between local schools and businesses to ensure our young people are ‘work ready’.

6. A Residential Child Care Action Plan was implemented, with a focus on improving outcomes for children by developing:

- a clear philosophy of care;
- a consistent model of support and service delivery;
- practice and culture change, supported by a workforce development programme.

This work has been progressed and feedback from the Care Inspectorate is very positive about the work undertaken. Currently, all three children’s houses are graded as 5 Very Good, on the 4 areas inspected: Quality of Care and Support; Quality of Environment; Quality of Staffing; and Quality of Management and Leadership.

7. On 5 March 2014, Cabinet approved a new approach to seeking better outcomes for looked after and accommodated children in East Ayrshire. The proposals aimed to:

- Reduce outwith placements;
- Reduce placement breakdown;
- Improve attainment for children and young people (looked after and looked after and accommodated)
- Reduce exclusions from school of children and young people (looked after and looked after and accommodated);
- Improve attendance of children and young people (looked after and looked after and accommodated);
- Improve emotional wellbeing of children and young people (looked after and looked after and accommodated).

8. This work has progressed and is monitored by the Alternative Care and Education Board. To date achievements have included:

- A reduction in external residential placements from a net number of 21 to 15;
- Non-recurring savings of £1,229,177;
- Achievement of between 90% and 95% of health assessments for all our Looked After and Accommodated children;
• Introduced a CELCIS research project on raising educational attainment for LAAC- started March 2016.

9. This integrated approach also highlighted the need for additional residential child care services to meet the needs of children with social, emotional and behavioural challenges. This work was taken forward through the completion of a site option appraisal in January 2015. Unfortunately in May 2015, it was concluded that no existing site was suitable to build a children’s house due to sites being too small; unavailable for sale; involved complex planning issues or were not appropriate to the care of children/young people. Depending on the location of the new house there could be additional costs associated with travelling. For example, in ensuring young people have access to transport links, are able to participate in activities, and to stay in touch with family and friends. This would include the finance of the capital cost on an annual lease arrangement (renewable every 3 years) for a small car at approximately £3,100 (total lease and running costs per annum) and the potential for taxi costs which could amount to approximately £1,000 per annum, depending on exactly where the location may be.

10. In light of the challenges, and recognising that the service was experiencing significant operational pressures in 2015, additional work was undertaken to consider the needs being presented and to revise the model accordingly. Progress reports were presented to the Transformation Board on 5 August 2015 and on 3 February 2016.

PROPOSAL

11. Based on our review, research and learning, it is proposed to develop a two bedded house and a four bedded house, within one management / support structure with access to tailored learning, training and employability support.

12. The specification for the house identified in the initial Option Appraisal remains, requiring:

- An area which supports good integration and community involvement (this would be preferable in a rural location);
- Good access to education, training, employment, health, leisure services and opportunities;
- Accessible transport options to facilitate family and community connections.

TWO BEDDED HOUSE

13. A two bedded house is required due to the challenges in caring for specific children with significant needs, for example, due to their background experiences and childhood trauma. Such a resource would also be beneficial where a child is not able to cope with a foster placement or group living situation. At present, the only option available to children in such circumstances is an externally provided service at an average cost of £4000 per week. It should be noted that accessing such resources can be problematic as external providers have control over their admission policies when considering the matching of young people. This has meant that East Ayrshire staff have had to manage high risk situations until a suitable resource has been identified. The availability of our own resource would therefore assist in meeting the needs of children, while offering greater placement choice and flexibility.
14. There are a range of properties available for sale across East Ayrshire ranging from £95k to £395k which could potentially meet the requirements (possibly with adaptation) of a two bedded house. There are distinct advantages in purchasing as there are likely to be suitable housing available, and a carefully chosen resource would also be already established in the community.

FOUR BEDDED HOUSE

15. There is an advantage in operating a house which has fewer children and young people than our existing six bedroom houses, as a slightly smaller number (some of whom may otherwise have been placed in external provision) can make a significant difference to group dynamics.

16. Based on the building of Benrig, a four bedded house would cost between £800k to build new (excluding the costs of purchasing land). However, given the challenges in 2015 in identifying an appropriate site, it is proposed that a two staged approach is adopted. Firstly to consider the availability of large properties which could be considered to meet the Care Inspectorate accommodation specifications. If this proves unsuccessful, consideration will be given to the option of building a new house. It is anticipated that the costs of a four bedded house will be in the region of £250k to £500k.

BUILDING AND PLANNING REQUIREMENTS

17. There are various building and planning requirements for the four bedded house, but the two bedded house would be classed as a “dwelling” and would not be subject to building warrant approval. With regards to Planning Permission for change of use for the option of purchasing a house, a house is Class 9 and is defined as: a house occupied by a single person, or a number living together as a family, or as a household of 5 persons or less.

18. Existing residential buildings (those being purchased) would not require building warrant approval as there is no change in occupation or use to define them as conversions as set out in Schedule 2, Regulation 4 of the Building Standards (Scotland) Regulations 2013. Based on the numbers of occupants intended, the two bedded house would meet the definition of a “dwelling”, i.e. a unit of residential accommodation occupied by not more than 6 individuals living together as a single household (including a household where care is provided for residents).

19. The application would be assessed under Non-Domestic Regulations and there would be upgrading works required in terms of: means of escape; fire alarm detection; emergency lighting; fire doors; and other aspects. Although, a building warrant would not be required if the numbers are six persons or less, there may be a degree of upgrading works required under the Fire (Scotland) Act 2005.

TWO / FOUR BEDDED HOUSE MODEL

20. It would be both practical and efficient to combine the management and care staff arrangements for the two bedded and four bedded houses. The two/four model means that the two houses would operate together, with the smaller house being seen as a virtual extension of the larger house. Thus the geographical location
between the two houses is an important consideration and we would seek to have them as close together as possible.

21. Having considered the potential staffing models, it is proposed to replicate the current care team model for the Two/Four Bedded Houses as follows:

- Currently each of our houses has Care Teams of Residential Carers, and 3.78 Night Carers (2 of whom are caring for the young people each night). There is a care schedule (rota system) to care for the children and young people 24 hours per day 365 days per year. Each house has a Manager who works 9am till 5pm, Monday to Friday, and each of the 3 Care Teams has a Senior Carer.

- There are 3 care periods (shifts) each day as follows:
  - Early = 7.30am till 2.30pm
  - Late = 2.00pm till 10.00pm
  - Night = 9.45pm till 7.45am; and
  - Thursdays have built in extra/overlap hours for team meetings

22. It is anticipated that this would meet Care Inspectorate registration requirements, with two residential carers on duty at any time. It should, however, be noted that this does not comply with the East Ayrshire Council job requirements for delivery of the Therapeutic Crisis Intervention Model. This would require to be managed through seeking assistance from the larger house when required. It is anticipated that this can be managed within the context of a small, supported care context.

23. The staffing model would be:

**Table 1: Contracted Hours**

<table>
<thead>
<tr>
<th>Staff Designations</th>
<th>Qualifications</th>
<th>Pay Grade</th>
<th>Contracted Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 House Manager – Large and small house</td>
<td>SVQ 4 or equivalent</td>
<td>£53,428 p.a.</td>
<td>37 per week</td>
</tr>
<tr>
<td></td>
<td></td>
<td>G12</td>
<td></td>
</tr>
<tr>
<td>4 Senior Carers – supporting the 12 Carers</td>
<td>HNC and SVQ 3</td>
<td>£40,201 p.a.</td>
<td>37 per week</td>
</tr>
<tr>
<td></td>
<td></td>
<td>G8+12.5% Shift Allowance</td>
<td></td>
</tr>
<tr>
<td>12 Children’s Carers – 6 of whom would cover the Small House</td>
<td>HNC and SVQ 3</td>
<td>£35,712 p.a.</td>
<td>37 per week</td>
</tr>
<tr>
<td></td>
<td></td>
<td>G7+12.5% Shift Allowance</td>
<td></td>
</tr>
<tr>
<td>7.78 Waking Night Carers – 4 of whom would cover the Small House</td>
<td>HNC and SVQ3</td>
<td>£40,028 p.a.</td>
<td>35 per week</td>
</tr>
<tr>
<td></td>
<td></td>
<td>G7+33.3% Shift Allowance</td>
<td></td>
</tr>
</tbody>
</table>

Source: Human Resources and Corporate Accounting

24. The combined operational costs of the model would be £1.189m (staffing and recurring costs). This reflects the estimated costs of operating a 4 bedded house and the estimated costs of operating a two bedded house. The introduction by the Scottish Government of a new degree level qualification will have implications for the workforce. From October 2017, Managers will have 5 years from the date of their re-registration to gain the new qualification as will new employees from the
date of their registration. Existing residential care staff will have 5 years from October 2019. Due to a number of variables, including lack of clarity over Government funding and current differences in how educational providers are quantifying existing educational qualification points towards the degree, it is not currently possible to estimate the costs of supporting the transition to degree level qualification. Costs would be expected to cover “back-fill” arrangements (including operational safe care necessities), and any associated books, course material and equipment, for example, laptops which may be applicable.

25. It should be noted that table 1 highlights the current minimum qualifications required, however this is in the process of change. All residential child care staff will require to be educated to degree level, and a ministerial working group is currently considering the implementation arrangements, which are planned for 2017. This is likely to be a further cost pressure for East Ayrshire Health and Social Care Partnership. This is currently being costed.

26. The overall unit cost of the two/four house model would be £3,802 per week. This compares with the average cost of an externally provided residential placement being £4,174 per week and the average cost of secure care being £5,663 per week.

EDUCATION, TRAINING AND EMPLOYABILITY

27. A key component of the success of the model will be the availability of tailor designed support for each child. Depending on the age and stage of the child, this may be focused on education, training and / or employability. It must, however be recognised that many young people will be unable to prioritise their learning, sometimes due to their emotional state or related to their previous experiences. For this reason, this accommodation model will require to find new and creative ways to engage children and young people, through relationships, activity and fun.

28. Given the research findings about the value of nature in promoting emotional wellbeing; the power of the performing arts in healing and the calming influence of animal / human relationships, this new service would wish to explore new and creative ways to reintroduce children and young people to education and training opportunities. Additional funding will require to be identified to meet the costs of such training and educational opportunities, and potential sources will be explored.

29. An event took place on 9 June 2016 in Centrestage, Kilmarnock, to take a different and imaginative look at what we need, how it might look, and how it might be developed. This involved a range of partners, including the Scottish Government and colleagues with experience in social enterprise, and our own staff in thinking imaginatively to help us create a plan for a new children’s house which can offer therapeutic based care and support for some of our more traumatised children and young people.

30. In considering the specific and challenging needs of the older children (mainly boys aged 15+), it has not been possible to agree a single integrated care and education model which could reduce the use of external placements. This reflects the need for provision to reflect the unique needs of each child, coupled with the difficulties associated with education and care being provided from a single small scale setting. Following the development session at Centrestage, further work is planned with Centrestage and Scottish Government colleagues about the potential for a
leadership academy, part of which would focus on responding to the needs of looked after children.

31. Colleagues from Educational Psychology and CAMHS have supported the children’s houses in developing the nurture programme. Educational Psychology have also been involved in helping us develop our underpinning philosophical approach model called East Ayrshire SNAP based on social pedagogy through their involvement in the Children’s House Development Board, and the Violent Incident Review Group. CAMHS, wider Health colleagues, and Educational Psychology have pledged their full support to the development of the new houses and the Intensive Fostering Scheme, based on identifying the needs of individual children and young people and robust and responsive multi agency support plans to meet their needs, particularly in times of crisis and emergencies.

SPECIALIST SUPPORT & MULTI AGENCY WORKING

32. A number of children and young people’s needs are such that they require support from a dedicated multi-agency team of professionals from different but complimentary professional disciplines, working closely together as part of a care team. For example, psychologists; residential care staff; teachers with experience of additional support for learning; and children’s nurses with mental health qualifications and experience in practice.

33. Operationally there can be issues around the speed and ease of access to specialist services for children and young people who require direct input at times of crisis which can potentially delay an immediate response to children and young people in crisis. There are various reasons for this including: -

- Specialists not being on-site;
- Obstacles within referral pathways;
- Insufficient numbers of specialists to meet demand;
- Competing priorities;
- Different professional perspectives on the immediacy of specific child care circumstances requiring a specialist response; and
- Lack of clear joint-working intervention protocols between partners and within agencies.

34. Work is underway with partner agencies to consider how all services could resource this new model of support, reflecting shared priorities and child centred practice. It is anticipated that the opportunities within the integration of Health and Social Care will assist this.

INTENSIVE FOSTERING

35. The Alternative Care and Education Board also set out to develop an intensive fostering service. This involves the provision of comprehensive family support in the community for a small number of children and young people, up to 18 years, with high level, complex needs as an alternative to secure or residential care/schools. As highly skilled people. Intensive foster carers, would provide single family placements to enable people to experience family living. Given the complexity indicated, it is likely that the service will be small, seeking to recruit 2/3 carer resources.
36. The proposed costs of the service will be £48k per placement. This includes an annual salary (self-employed) estimated at £30k, fostering child allowance of £10k (at existing approved rates), out of hours allowance of £11k (covering 3 intensive foster care placements) and £5k for start up and emergency costs.

37. In view of the challenges involved in this type of caring role and the skills and experience required of the foster carers, it was noted that it may be attractive to existing employees of East Ayrshire Health and Social Care Partnership and East Ayrshire Council, in particular those working in a residential settings. As such, approval was given by Cabinet in September 2015 to extend the Council’s Career Break Scheme, for those employees seeking to undertake fostering including Intensive Fostering, from 4 to 5 years.

LEGAL / POLICY IMPLICATIONS

38. The proposals set out will ensure that the Council meets its statutory responsibilities to looked after and accommodated children, and fulfils the commitment made in respect of our corporate parenting responsibilities.

COMMUNITY PLANNING IMPLICATIONS

39. The proposals set out in this report are consistent with the aspirations outlined in the East Ayrshire Community Plan. As outlined at paragraphs 32 to 34, there are implications for partner agencies in respect of education, training, employability, specialist support and multi-agency working. These matters are being discussed with colleagues as this reflects best practice based on the “Getting it Right for Every Child” practice model.

40. As outlined at paragraph 29 and 30, Centrestage is committed to working with the new two/four house model to create tailored support and opportunities.

EQUALITIES IMPLICATIONS

41. This proposal is consistent with all of our corporate parenting actions which seek to promote better opportunities for looked after children, recognising that care experienced young people can experience stigma and barriers throughout their lives, leading to poorer long term outcomes.

RISK IMPLICATIONS

42. The proposal sets out a number of risks including the:

- challenges in meeting the specific needs of traumatised children, and the risks which this presents to the service in managing this (paragraph 13);
- the risks associated with the transition to the new degree level qualification including costs and staff cover arrangements;
- financial risks associated with continuing to rely on externally provided services;
- risks associated with a new model of support, meaning that this requires to be tested and managed in conjunction with partner agencies;
- potential difficulties in implementing the Therapeutic Crisis Intervention Model;
- potential risks associated with locating an appropriate house and / or site;
- potential risks associated with negative community reaction;
43. The proposal to develop this two/four bedded house model, with the support of Centrestage, education and other partner agencies will assist to mitigate these risks.

**HUMAN RESOURCE IMPLICATIONS**

44. The implementation of this model will require the creation of the posts set out in paragraph 23 above. The associated costings are detailed in the table below. The posts will be created through the EST1 process and will then be advertised within a timescale which will ensure that the employees are in post and have been through the induction process prior to the houses opening.

<table>
<thead>
<tr>
<th>New/Existing Post</th>
<th>Grade</th>
<th>Post No.</th>
<th>Add*</th>
<th>Delete</th>
</tr>
</thead>
<tbody>
<tr>
<td>House Manager</td>
<td>G12</td>
<td>New post</td>
<td>£41,481</td>
<td></td>
</tr>
<tr>
<td>Senior Residential Worker (4 posts)</td>
<td>G8 (plus 12.5% shift allowance)</td>
<td>New posts</td>
<td>£124,848</td>
<td></td>
</tr>
<tr>
<td>Residential Worker (12 posts)</td>
<td>G7 (plus 12.5% shift allowance)</td>
<td>New posts</td>
<td>£332,721</td>
<td></td>
</tr>
<tr>
<td>Residential Worker (Nights) (7.78 posts)</td>
<td>G7 (plus 1/3 night workers allowance)</td>
<td>New posts</td>
<td>£241,844</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td>£740,894</td>
<td></td>
</tr>
<tr>
<td>Employers Costs</td>
<td></td>
<td></td>
<td>£213,377</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td>£954,271</td>
<td></td>
</tr>
</tbody>
</table>

*Salaries based on third point of grade for illustrative purposes

**FINANCIAL IMPLICATIONS**

45. On 5 March 2014, Cabinet approved a report on a new approach to seeking better outcomes for looked after and accommodated children in East Ayrshire. This noted that a net recurring saving of £1.357m was possible by the close of the financial year 2016/17. This reflected both an estimated reduction of 12 placements, and the recurring costs of alternative care provision. This work has been overseen by the Alternative Care and Education Board, reporting to the Transformation Board (as outlined at paragraph 7 and 8).

46. The financial model approved in the March 2014 report was a gross saving of £3.045m, with the not recurring saving as noted above of £1.357m. The investment total in this report is from one previously approved £1.688m.

47. The Board achieved total non-recurring savings of £1,229,177 in 2014/15 and 2015/16, however the continuing operational pressures are creating challenges in
relating the planned savings in 2016/17 (£800k) and 2017/18 (£500k). This further emphasises the need for additional internal care resources within East Ayrshire.

48. The summary financial implications of this report is a recurring annual commitment of £1.139m incorporating staffing costs £0.954m, two / four bedded running costs £0.099m and capital debt charges £0.086m, leading to delivery of the total net saving of £1.357m.

RECOMMENDATIONS

49. It is recommended that Cabinet:

i) approve the development of the Two/Four Bedded Model as set out at paragraphs 5, 13-16 and 20-26;

ii) approve the purchase of a two bedded house as set out at paragraph 5;

iii) approve the purchase of a four bedded house or the scoping of appropriate sites as set out as paragraph 17;

iv) approve the creation of the posts outlined at paragraph 44;

v) approve the costs and fees for intensive foster care as set out at paragraph 36; and

vi) approve the total costs of the development as set out at paragraph 47.

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Director of East Ayrshire Health and Social Care Partnership

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