

Recommendations for policy-makers:
an ADCS commentary on safeguarding pressures

Foreword

This research and the accompanying commentary present a stark picture of the pressures on children's social care services, particularly those services working with the most vulnerable children – those at risk of significant harm, and those who are being cared for by the state for their own protection. There are more such children needing our help than two years ago and the rise has been sustained beyond the “knee-jerk” reaction to the case of Baby Peter. One of the reasons for this rise must be the success of better and earlier identification of children requiring support, by both professionals and the public as they become increasingly aware of child protection issues – these children always needed our help, now we are better at finding them.

The reality, however, is that the services designed to help those most in need of protection are unable to cope with the increased numbers, particularly with fewer resources and without significant changes to the way that services are delivered. There must be a significant shift from earlier identification to earlier intervention, with local authorities and partner agencies working together to prevent or mitigate problems before they become more serious, and more costly to solve.

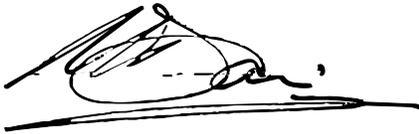
Without investment in early intervention, we risk creating a perfect storm – as demand rises and resources reduce, the current early intervention schemes will come under increased pressure as resources are siphoned off to cope with pressures on statutory services. Some means of protecting these services must be found, and in the following pages we propose a ring fenced grant either for early intervention specifically, or for service redesign. At the very least, policymakers must recognise that immediately cutting the resources for children's social care as a whole will threaten services that are expected to choke off demand, and cost, in the longer term.

There are a number of reviews underway that are examining how a redesigned system could increase the amount of time that social workers spend working directly with children and their families and improve the way care proceedings are managed – we believe that the results of these reviews will contribute to putting the sector on a more sound financial footing, as well as improving outcomes for children and young people.

Recommendations do not become reality, however, without investment. Central and local government must prioritise the resources required to support and train social workers in order to build a workforce that is confident to assess and act on needs earlier and without the prescriptive guidance that currently stifles their initiative and hinders prompt action.

Social workers are not the only professionals that keep children safe and there must be a continued commitment to partnership working if early intervention is to make a substantial contribution to reducing demand for more specialist services, including child protection. Local authorities must lead on bringing services together, however they are to be provided in future, to ensure that children's needs are identified, assessed and met as promptly as possible. Universal Services, including health, early years services and schools play a key role in this process and must continue to do so. The introduction of the pupil premium must be accompanied by an expectation that schools demonstrate how this money is used to work with other agencies to improve the well-being of the most vulnerable children.

We must not let short term cuts affect the long term well-being of the most vulnerable children and young people – in the following pages we make some recommendations about how central and local government, partner agencies and researchers can contribute to finding solutions to the “perfect storm” that surely awaits if nothing is done.



Marion Davis

President ADCS

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This is a professional commentary accompanying Phase 2 of the ADCS Safeguarding Pressures research published today (Phase 1 having been published in April 2010). The following recommendations are made by ADCS as the single national voice for Directors of Children's Services and their senior management teams. The recommendations seek to inform decisions taken to cope with the increased demand for child protection services highlighted in both phases of this research project. These recommendations relate to central government, the children's services sector and the research community.

Summary of recommendations

For Central Government

- 1) There must be a twin-track approach to funding children's social care, including child protection, recognising the pressures (capacity and financial) on statutory child protection interventions at the same time as focussing efforts and resources on early intervention and preventative work.
- 2) Funding for early intervention work by children's services departments in local authorities and health agencies should be protected from funding cuts in the first two years of the duration of the CSR 2011-2015. This will enable service re-modelling to be done which can then be brought in safely over Years 3 and 4 of the CSR period. This protection could take the form of:
 - (a) a specific grant for early intervention and prevention work; or
 - (b) the introduction of a Transforming Children's Social Care Grant, similar to that offered for adult social services to assist local authorities in doing the necessary re-modelling required to improve the social return on the investment.
- 3) Schools must be held to account for how the Pupil Premium is used to support vulnerable children to ensure that early identification and intervention is seen as part of this work.
- 4) Central government should recognise the impact of changes in case law and guidance and ensure sufficient funding is available to meet new/clarified duties that impose additional burdens on local authority children's services departments.
- 5) Funding for social work reform and long term commitment to developing the workforce must be maintained. Specifically, steps should be taken to mitigate the impact on social work

recruitment and retention of the cap on the immigration of skilled workers from outside the EU, both in the short term and in the subsequent points based system.

For Professor Munro's Review

- 6) There should be a clear focus on removing the bureaucracy and levels of prescriptive processes, including those surrounding the current Serious Case Reviews (SCR) process, in order to free front line practitioners to adopt a 'learning from practice' approach to their work. This must include a radical overhaul of the current statutory guidance *Working Together to Safeguard Children and Young People*.
- 7) The role of the Independent Reviewing Officer (IRO) should be reviewed – this review should reference the IRO role both before and after care proceedings
- 8) The processes for assessing and accrediting local authority foster carers and adopters should be simplified to allow local authorities to keep pace with the increasing demand and reduce the costs associated with using Independent Fostering Agencies (IFA).
- 9) Process based indicators, such as those measuring timeliness of assessments and reviews, should be replaced with outcome based, child-focussed qualitative indicators that are sophisticated enough to reflect increased volumes of activity at the same time as increased staff vacancy rates. Overall, there should be fewer, smarter outcome indicators with flexibility about how local authorities meet them.
- 10) There should be a sector-led approach to defining a broad list of datasets that are relevant to service planning, outcome focussed and of use to authorities seeking to improve and compare their performance with other authorities.

For the Sector

- 11) Local authorities should consider monitoring the types of referrals currently listed under "All Other" to ascertain if a further breakdown of referrals by source would provide better quality intelligence about the types of cases entering the system and how these cases are identified
- 12) The processes for assessing and accrediting local authority foster carers and adopters are too slow to keep pace with the increasing demand, as noted above. Increasing the use of collaborative approaches to commissioning placements across local authorities, or indeed across a region or sub-region, may in part ameliorate the impact of the time it takes to go through the assessment and accreditation processes.
- 13) Local authorities should continue to lead their local partnership arrangements, including with schools. Colleagues working in the health service, in the police, in the third sector, in adult social services, housing and regeneration departments of local councils are part of the solution to protect vulnerable children, young people and their families.

14) Local authorities should examine the use of the need code "low income" to ensure it is being used appropriately and to inform future policy relating to child poverty.

For Researchers

15) A deep-dive analysis of the reasons why some local authorities have experienced a reduction in demand for statutory child protection and Looked After Children services – i.e. what it is that has made the difference. Anecdotally, it seems that the reduction is at least in part a result of investment in early intervention and preventative work, but this needs to be evidenced in a robust way.

16) In order to better inform policymaking at a national and local level, research organisations should investigate:

- what has made the difference in that small number of local authorities which have experienced a reduction in demand for children's social care services
 - the effect of increased demand on performance
 - the reasons behind the variation in relative demand, outcomes and expenditure
 - longitudinal studies of the impact of interventions and different actions to better understand what interventions achieve the best outcomes over time; and
 - the potential benefit of an increased focus on the support services provided to vulnerable adults who have a child who is the subject of a Child Protection Plan, or who have children taken into care on more than one occasion to prevent further receptions into care.
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Introduction – the overall increases in demand (between Oct-Dec 2007 and Oct-Dec 2009)

Key Findings

Phase 1 – Between Oct-Dec 2007 and Oct-Dec 2009

- **25%** increase in initial contacts
- **17%** increase in referrals
- **21%** increase in Section 47 enquiries
- **23%** increase in initial assessments
- **20%** increase in children who were subjects of initial child protection conferences
- **33%** increase in children who were subjects of a child protection plan at period end
- **39%** increase in children subject to Police Protection
- **32%** increase in Emergency Protection Orders
- **38%** increase in Interim Care Orders
- **8%** reduction in Full Care Orders granted
- **17%** increase in children starting to be looked after
- **8%** increase in total number of children looked after at the period end.

Phase 2 – From 2007/8 to 2009/10

- Predicted rise of under 18 population by **5.5%** by 2019
- An increase in births since 2002, leading to an increase in 0-5 year olds.
- **5.5%** increase in under 18 population represents an additional 3,000 looked after children and 1,900 child protection plans.

The first phase of this research identified a significant increase in the numbers of children coming to the attention of child protection teams in local authority children's services

departments. This had led to increases in the numbers of initial and core assessments, child protection plans, various types of care orders and the numbers of children becoming looked after. The second phase of this study confirms the increases reported in Phase One, both through triangulating the Phase 1 data with similar studies and through additional data from local authorities responding to the second phase of data collection, which includes data up to the end of the financial year 2009/10. The first phase of this research and similar studies also identify a rise in the numbers of staff working on these activities, though the increase in staffing levels has by no means matched the increase in activity. The second phase of the study includes an examination of predicted increases in the under 18 population and its possible effect on demand for child protection services. Assuming the incidence of children and young people requiring child protection services remains at the same proportion of all under 18s, population increases alone would result in an additional 3,000 looked after children and 1,900 additional children subject to child protection plans.

1. Impact

Key Findings

Phase 1 - Between Oct-Dec 2007 and Oct-Dec 2009

- 10% increase in staffing

Phase 2 – From 2007/8 to 2009/10

- 12% increase in total local authority children's services budgets from 2007/08 to 2009/10
- 5.9% overspend predicted in 2009/10
- Estimated **additional** 63,000 hours per agency per annum to meet increased demand for child protection plans since 2007
- 1.2 percentage point decline in performance against NI67 (Completion of child protection plan reviews within required timescales)
- 2.5 percentage point decline in performance against NI 59 (Completion of initial assessments within required timescales)
- 5 percentage points decline in performance against NI 60 (Completion of core assessments within required timescales)

The second phase of this study begins to examine the impact of the increased demand on local authorities, in terms of budgetary pressures and on levels of performance as measured by timeliness performance indicators. As with staffing levels, it is clear that local authorities were aware of increasing demand when setting budgets for 2009/10 – with responding authorities reporting an increase in their total departmental budget allocation for that year of 12% compared to 2007/08. However, the effects of rising levels of safeguarding activity continue to have an impact both on budgets and performance indicators, over and above the extra resources allocated - authorities report a 5.9% overspend in 2009/10 and a decline in their ability to complete assessments and reviews within the timescales set out in the statutory guidance.

Continuing to absorb these rising levels of demand into the future would be challenging in any environment. The predicted cuts to local authority funding of 25% or more in the imminent Comprehensive Spending Review make it even more important to understand why the rise in

demand has occurred and how authorities can re-design the services they deliver, and how they deliver them, to meet both need and budgetary restrictions.

1.1. Cost and performance

The cost calculations, based on unit costs devised by Loughborough University, do not take into account the variation in costs incurred by individual authorities or in individual, highly complex cases, but they do give an indication of the costs involved in work of this kind. The cost calculator shows that the majority of the costs incurred on “front door” services are on staff time and the separate calculation of the time required to attend meetings related to child protection plans, as dictated in guidance, shows the significant time commitments required by that process. The estimate by one respondent to the study that when preparation, travel and recording actions decided at conferences is taken into account, each meeting takes up 7 hours of the lead social worker’s time and 6 hours of the Independent Reviewing Officer. This gives some idea of the burden of procedural compliance – that scrutinising the work done takes as long as completing the work itself is absurd. This is a result of the reams of guidance and procedural proscription that surround child protection work and dictate the number of meetings and their frequency, as well as attendees and ways of recording the outcomes of these meetings. This proscription reduces local authorities’ flexibility to act appropriately according to the case and to reduce costs where possible without reducing the quality of safeguarding activity. We strongly believe that, as part of the Munro review, the role of the Independent Reviewing Officer both before and after care proceedings should be reviewed as a potential area of for reducing duplication in the system.

The study also reports concerns from local authorities responding both to this and similar studies, that as demand increases, the quality of assessments may decrease. This is due, in part, to the difficulties faced by local authorities in filling social work vacancies and in securing sufficiently skilled and experienced social workers to handle particularly difficult cases. Another factor is the existence of performance indicators measuring the proportion of assessments and reviews undertaken to the timescales dictated by statutory guidance. Meeting specific deadlines for the completion of tasks, in an environment of increasing pressures, may sacrifice quality for the sake of achieving targets. These targets perform part of a performance management framework that attempts to micro-manage casework, in this case by specifying the time taken to complete assessments.

1.2. Variation between local authorities

There is significant variation in the extent to which demand has increased across local authorities, with some local authorities seeing decreases in one or other stage of the child protection process. The financial capacity to absorb increases is similarly varied. It is therefore important, when seeking solutions for managing demand, to appreciate that not all local authorities are starting from the same place. Some will have already taken steps to redesign services to address increased demand, reducing budgets and to address vacancy rates, and

some will have done so successfully, using a variety of approaches including the increased use of para-professionals to undertake children in need work, investing in early intervention and preventative strategies in order to potentially reduce the volume of children who become the subjects of child protection plans. Other authorities may not have had sufficient capacity to make such changes, being overwhelmed by the surge in demand for immediate services. Local context and conditions are key to understanding the nature of the pressures, the reasons for them and potential solutions. For example the recent and welcome decision to end the detention of children for immigration purposes will have a significant impact on some LAs because an alternative to detention is required and although a partnership approach to this issue is essential, plainly there will be a significant additional unfunded pressure on LA children's social care services.

There is much that the leaders of local authority children's services departments can learn from other authorities and much more must be done to facilitate the sharing of expertise and experiences to support local authorities in re-designing services to cope with the increases described in Phase 1.

This local variation also raises questions about the appropriateness of centrally issued guidance and performance indicators – the issues facing local authorities vary widely and so too must the solutions: more flexibility in how child protection services are delivered and by whom, with outcome based indicators holding authorities to account, could help to ensure that the quality of those services is maintained. There is, at present, little understanding of the reasons behind this variation and it would be valuable for this to be explored further.

More longitudinal studies of children, young people and families need to be established so that the effect of interventions and different actions can be tracked over time to better understand what interventions achieve the best outcomes over the longer term. This will compliment the work undertaken by C4EO in its publication *Grasping the nettle: early intervention for children, families and communities* (due to be published in October 2010)¹. Similarly, there is scope for a further project examining if there is any correlation between those authorities seeing decline in their performance measured by these indicators and the rise in demand for child protection activity.

Recommendation: As part of the Munro review, the role of the IRO should be reviewed. So too should the levels of bureaucracy and prescription that impede frontline practitioners from learning from their own and others practice.

¹ This practice guide to the challenges and opportunities in supporting children, families and communities through early intervention, based on effective local, national and international practice identifies specific interventions proven to work and in a number of examples includes information on the costs of effective interventions at project level.

Recommendation: Process based indicators, such as those measuring the timeliness of the completion of assessments are severely limited as measures of quality. They should be replaced with outcome based, child-focussed, qualitative indicators.

Recommendation: In order to better inform policymaking at a national and local level, research organisations should investigate:

- **what has made the difference in that small number of local authorities which have experienced a reduction in demand for children's social care services**
- **the effect of increased demand on performance**
- **the reasons behind the variation in relative demand, outcomes and expenditure**
- **longitudinal studies of the impact of interventions and different actions to better understand what interventions achieve the best outcomes over time; and**
- **the potential benefit of an increased focus on the support services provided to vulnerable adults who have a child who is the subject of a Child Protection Plan, or who have children taken into care on more than one occasion to prevent further receptions into care.**

2. Reasons

Key Findings

Phase 2 – From 2007/8 to 2009/10

- **53.3%** increase in children becoming looked after for reasons of abuse and neglect
- **66.3%** increase in children under 1 subject of a child protection plan
- **131.6%** increase in young people over 16 becoming looked after (although absolute numbers remain relatively low)
- **150%** increase in children becoming looked after for reasons of low income (although absolute numbers remain low the increase is from 20 – 50 children per year)
- **336%** increase in young people aged 16 and over subject to a child protection plan (from 90 to 393 per year)

The first phase of this study suggested that, given the rise in activity began prior to the high media profile given to the case of Baby Peter, that this case could not be the sole reason for the rise. While 97% of respondents identified the Baby Peter case as one possible reason for the increases, many other reasons were also offered. This second phase of the study appears to confirm that analysis – that the rise is multi-causal - through a more detailed examination of the characteristics of children involved and the agencies that referred them. If this is the case, an examination of these reasons, whether they are temporary or permanent, is necessary to assess the next steps in managing demand. Such an examination follows.

2.1. Source of referrals

The analysis of the source of referrals to children's social care is the line of enquiry where we might conclude that the Baby Peter case has had the most impact. There has been a significant increase in the proportion of referrals from organisations and individuals that are grouped as "All Other" - including other local authority departments such as housing and adult social care, as well as the general public reporting concerns about a child. This rise mainly occurred between 2008/9 and 2009/10, suggesting it may be a direct result of increased public and professional awareness of child protection services following the case of Baby Peter.

In contrast, the proportion of referrals from the police and health services has declined despite anecdotal evidence that the overall proportion of referrals from these groups had increased

particularly with regard to domestic violence where local authorities report anecdotal increases in contacts and referrals from police. It is interesting to speculate on the apparent dissonance between anecdotal evidence of increased referrals from Police with regard to domestic violence and the decline in the proportion of referrals from Police; there could be two reasons. Firstly, that some police forces are employing a triage approach to incidents of domestic violence where children are involved, and thereby reducing the actual number that become referrals to children social care for that purpose. Or secondly, as is the case in some local authorities, that a Social Worker is based within a Police domestic violence unit, thereby reducing referrals through early identification and intervention by Police and not local authority social care services. In these instances, it may also be the case that such co-location of professionals technically results in any referral being made by the Social Worker and not the Police Officer and is not therefore recorded as a referral from the Police.

Recommendation: Local authorities should consider monitoring the types of referrals currently listed under “All Other” to ascertain if a further breakdown of referrals by source would provide better quality intelligence about the types of cases entering the system and how these cases are identified.

2.2. Age groups

While there has been an increase in the proportion of children under one year of age involved at all stages of activity, as one might expect as a result of increased awareness of the risks to babies and very young children as highlighted in the Baby Peter case, there have been increases in every age group, and the percentage increase in young people over 16 dwarfs even the rise in activity relating to the youngest age group, although it is the increases seen in the younger age groups that currently have the greatest financial impact on local authority children's services.

As noted in the full report, it is probable that the increase in the numbers of young people over 16 entering care is the result of the Southwark Judgement and its finding that not only should responsibility for housing 16-19 year olds rest with local authority children's services departments but also that a full assessment should be done under the Framework of Assessment for Children in Need. It is important to note that both the judgement itself and the statutory guidance issued to local authorities are clear that these young people should not enter care as a “coercive act”². The Southwark judgement is one example of the development of case law that has had an effect on the demand for services from children's social care departments and their partner agencies. It is important that the judiciary is aware of the impact of their decisions in individual cases on the wider system. It is also necessary that, where the judiciary do make such decisions, the additional burdens are acknowledged in the funding provided to local authorities. The previous government did not view the Southwark Judgement as an

² Judgments - R (on the application of G) (FC) (Appellant) v London Borough of Southwark (Respondents) - <http://www.publications.parliament.uk/pa/ld200809/ldjudgmt/jd090520/appg-2.htm>

additional burden³. Given the findings in the attached report show a doubling of numbers of young people over 16 in the care system, the reality of the additional burden is now apparent and must be addressed in the funding provided to children's services departments.

Recommendation: Central government should recognise the potential impact of changes in case law and guidance (e.g. care planning) and ensure sufficient funding is available to meet new/ clarified duties that impose additional burdens on local authority children's services departments. The additional burden on local authorities of implementing the Southwark judgement should be funded.

2.3. Need codes

The need codes recorded on social care systems at the point of referral, and at the point of becoming looked after together with categories of abuse of children becoming subjects of Child Protection Plans also suggest changes in the population subject to child protection activity. At each stage, children suffering abuse and neglect make up the largest category of need and this proportion has grown since 2007, beginning before the case of Baby Peter and rising steadily over the three year period covered by the study. The responses by Heads of Safeguarding to qualitative questions provide a range of possible reasons for this increase, for example the better identification of children suffering from abuse and neglect by partner agencies through improved multi-agency training and communication. It is interesting to speculate that, as Phase 1 of this research found, alongside an increase in a range of Care Orders (except FCOs) and the evidence from Phase 2 that abuse and neglect remains the largest need category, that the conviction rate for abuse and neglect amongst the parents, carers, guardians of these vulnerable children has not increased commensurately.

The study looked at contacts and referrals into children's social care, not only those cases that progress to child protection procedures. Reasons for referral to children's social care might include a child's disability or unstable family situation which suggests that the child and their family might benefit from extra support. These children are defined as being in need, rather than in need of protection. Whilst data quality in recording a valid need code for referrals improved significantly over the last two years, skewing the size of the increases somewhat, the increases are still evident.

The increase in the proportion of referrals allocated need codes other than N1 (Abuse or Neglect), while smaller absolute numbers are involved, suggests that partner agencies are referring children and young people in families seen as dysfunctional or under acute stress. This may, in part, be a result of the economic climate and the increased strain this puts on families. If this is the case, we may expect to see these categories continuing to rise as public spending cuts, including to welfare payments, are implemented. Of particular concern is the proposed cap

³ <http://www.communitycare.co.uk/Articles/2010/01/14/113556/no-extra-funding-to-meet-impact-of-southwark-judgement.htm>

on the level of Housing Benefit. This explanation may also be supported by the increase in the number of children referred and becoming looked after for reasons related to low income, though the cause of this increase is far from clear – it may be that 16 -18 year olds coming into the child protection system due to the requirements of the Southwark judgement have also been categorised in this way. This category should be monitored within local authorities that have seen a rise in its use to ascertain the reasons for the increase, as clearly the numbers could continue to increase if the economic downturn itself continues, or when the most vulnerable families start to feel the effects of public spending reductions.

Recommendation: Local authorities should examine the use of the need code “low income” to ensure it is being used appropriately and to inform future policy relating to child poverty

3. Redesigning services to address and manage demand

3.1. Working in partnership

Safeguarding is “everybody’s business” (Laming, 2003) and it has been widely recognised that children’s social care services cannot work effectively without the co-operation of other public and third sector agencies. This co-operation extends to identifying children who may be in need of additional support or protection; assessing the extent of needs through the use of the Common Assessment Framework; making appropriate referrals to children’s social care and providing support packages where they are identified through the assessment process. The police, health agencies and the third sector are the most common partners in this work. This may be an artefact of the sample included in our study and certainly there was significant variation in the change to police and health referrals being received. The government’s intention to increase the number of Health Visitors is welcome, it is quite possible however that this too will increase the number of initial contacts and referrals. This in itself is not a problem of course, but the unfunded nature of the increases is. An alternative interpretation of the widespread concern may be that these agencies are getting better at referring relevant cases, through an improved understanding of thresholds and therefore a higher proportion of these referrals progress to assessment and provision of services – thus having a disproportionate effect on the workloads for child protection services. This requires further investigation.

Recommendation: Research organisations should investigate in more detail the referral pathways from the police, health services and the third sector into children’s social care.

Recommendation: Schools must be held to account for how the Pupil Premium is used to support vulnerable children

3.2. Early intervention and the Common Assessment Framework

Key Findings

- 165% increase in use of Common Assessment Framework between 2007/8 and 2009/10

There has been much debate around the potential for early intervention strategies to reduce the demand for and pressure on social care services, and particularly the “front door” assessment process. This study shows that the use of the Common Assessment Framework has increased dramatically in the past three years. The positive effects of the use of the Common Assessment Framework by partner agencies may well be reflected in the decrease in referrals of disabled or

ill children and those whose parents have a disability or illness – these families are being supported by partner agencies, such as health services, who can draw on social care expertise without formal referral to social care.

Responses to qualitative questions show concern that while early assessment is happening, though the use of the CAF, partner agencies are not willing to take on the role of lead professional in cases of family dysfunction or social unacceptable behaviour, where abuse and neglect are not apparent, and are continuing to refer these cases to children's social care. This would go some way to explaining the longer term increases in these cases – the children are identified earlier, when previously they may not have been, but are not being offered services at this early stage that may prevent the need for children's social care to become formally involved.

It is clear from the costs put forward in this study, and elsewhere, that the most expensive activities undertaken by children's social care services is the care of looked after children, while child protection activity is also demanding on staff time, and thus resources. Early intervention has been shown to reduce the need for these costs to be incurred, as problems are prevented rather than dealt with. In the current climate, increasing investment in early intervention is incredibly difficult for local authorities facing rising demands for "hard end" child protection measures. Without continuing to invest in early intervention, the situation will be much worse in two years time. Significant investment in early intervention and preventative services may well have the effect of reducing demand for more expensive child protection work and services for Looked After Children.

3.3. Use of data to inform policy making and service planning

Current and wide ranging datasets and the ability to compare such information over time is crucial to understanding the extent and nature of demand for services and for assessing the cost-effectiveness of the services provided. This study has revealed the difficulty that some Local Safeguarding Children Boards and local authority finance teams have in using the data available in this way. The case is clearest when attempting to compare detailed financial data over the last three years. Changes in definitions and reporting requirements make comparison over time difficult – such a comparison would require significant work on the part of local authority data and finance teams to reconcile the differences in order to give an overall picture. Other national datasets are published too late to be of much use in service evaluation and planning: the dataset on which this part of this study is based – the Children in Need Census statutory return – is not usually published by the Department for Education until November of each year, when local authorities have already begun to plan for the following year's budget. More dramatically the most recent trend data published about emergency admissions to hospital available from the Department of Health date from 2006/7, since which time changes to the

policy framework and the development of local practice will undoubtedly have affected trends in this area.

Local datasets collected and analysed by the LSCB or Children's Trust to inform local policy and practice are even more vital – as we have seen the variation among local authorities means that an understanding of the local context and performance is vital to service planning and design. Local data collection has its disadvantages – this study was unable to quantify additional safeguarding activity across partner agencies in part due to the diversity of datasets collected reducing the availability of a large sample. Those datasets that were comparable were based on national indicators and statutory returns, such as the numbers of looked after children. The importance of good quality data and needs assessments to evidence what works, commission, and more importantly de-commission services at this time of acute financial pressure is key. The tension between the need for locally relevant and current data and the need for national definitions to allow for comparison and the identification of national trends must be resolved. A sector-led approach to defining national datasets that are relevant to service planning and focussed on outcomes, rather than processes, together with better utilisation of technology to achieve this, would mitigate this tension, allowing local authorities to select locally relevant indicators from a list of nationally defined datasets. These datasets could then be used to support sector-led improvement through the identification of trends in similar authorities, and therefore the supply of appropriate support, and the ability to monitor progress against this set of indicators.

Recommendation: There should be a sector-led approach to defining a broad list of datasets that are relevant to service planning, outcome focussed and of use to authorities seeking to improve.

Conclusion – Moving towards solutions

Phase 1 and 2 of this research show the increased number of children becoming the subject of child protection plans, an increase in care proceedings and to an increase in the number of children who become looked after. We also know that there are damaging delays in court processes which not only have a negative impact on the outcomes of the children and young people concerned but also add significantly to the costs of care proceedings. The Plowden report recommended that local authorities should not bear the cost of care proceedings from April 2011.

By intervening early and by working to prevent children and young people becoming the subjects of child protection plans there would be commensurate cost savings associated with court processes in care proceedings. The ongoing Family Justice review is likely to make recommendations about the role and contribution of the local authority to these processes which will require remodelling of services and retraining of staff to work within the new model.

Recommendation: The Plowden recommendation should be implemented from April 2011 – removing a cost burden associated with the increase. Local authorities should keep the resources originally devolved for this purpose to help to cope with the other pressures associated with rising demand and the review of the Family Justice system.

We recognise the need for the government to reduce the national deficit and that all parts of the economy must contribute; LA children's services departments are no exception. But, as this research shows, demand for statutory child protection and LAC services has increased significantly over the last three years, thereby increasing financial pressures. There is no evidence that demand will reduce and therefore no indication that the associated financial pressures will reduce either. On the contrary, predicted growth in the under 18 population alone will increase the demands and therefore further increase the financial pressures faced by local authority children's social care services. As local, system and national leaders we must find a means by which the necessity for and volume of statutory child protection and LAC activity is reduced. This means a twin-track approach that recognises the pressures (capacity and financial) on statutory child protection interventions at the same time as focussing efforts and resources on early intervention and preventative work.

What central and local government collectively must do is find a way of avoiding the unintended consequence of cutting so hard on preventative and early intervention services (which are in the most vulnerable and un-ring-fenced parts of the LA children's services budget) that we further increase the financial pressure on statutory child protection and LAC services further down the line. Further increased demand on those services is unsustainable. The way in which the need for financial savings intersects with a spike in demand for statutory child protection and LAC services combined with the ring-fenced, grant funded nature of some of the budgets for universal services such as health and schools creates the likelihood of a 'perfect storm' where

we are forced to cut precisely those targeted services which reduce demand for statutory and specialist services later.

Shielding early intervention and prevention work in children's social care from the budget cuts in the first two years of the CSR will enable local authorities and their partners to take into account the thinking and recommendations of a variety of important reviews that are currently underway and not due to report until after the CSR e.g. Professor Munro's review of child protection services, the Family Justice Review, the Allen Review of early intervention and so on. The implementation of the outcomes and recommendations of these important reviews and others, may well go some way towards increasing the capacity within local authority children's social care services to respond to the increasing demand, to redesign services so that social workers can spend more of their time with children, young people and families, as well as supporting the work of local authorities to invest in cost-effective early intervention and preventative work. These services are the same services that help remove the barriers to learning and therefore local authorities' ability to invest in early intervention and preventative services also support schools' endeavours. The Government's intention to introduce a Pupil Premium attached to the most vulnerable and disadvantaged children and funded from resources that are in addition to the DSG, is laudable. But, if that additional resource is to be secured by 'asset-stripping' other specific grants within the children's services budget the intended benefit will not be realised fully.

Recommendation: Funding for early intervention work by children's services departments in local authorities and health agencies should be protected from funding cuts in the first two years of the duration of the CSR 2011-2015. This will enable service re-modelling to be done which can then be brought in safely over Years 3 and 4 of the CSR period - this could be through:

- (a) A specific grant for early intervention and prevention work.**
- (b) The introduction of a Transforming Children's Social Care Grant, similar to that offered for adult social services to assist local authorities in doing the necessary re-modelling required to improve the social return on the investment**