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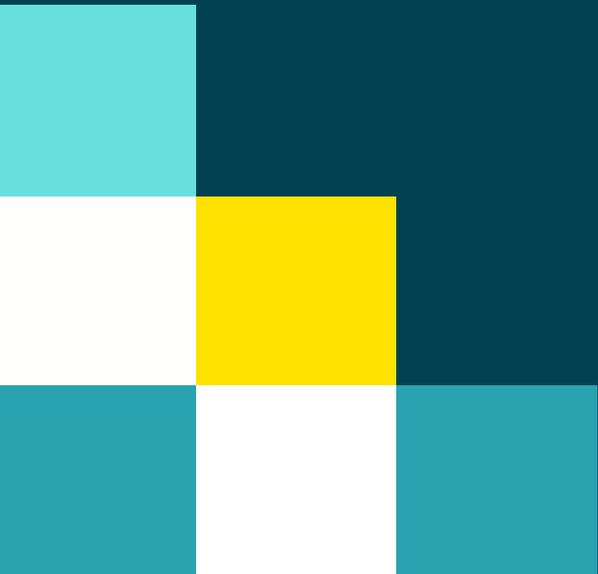
Analysis of the Factors Contributing to the High Rates of Care in Wales

Briefing Paper (Revised)

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Wales Centre for Public Policy

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This report was first published in March 2019. The following amendments have been made to this version:

- Table 3 amended to correct typographical errors
- Revisions to the section on the family courts (p53-60). This section reflects the data from the updated PLATO tool released on 27th June 2019, superseding the original tool released in March 2018. The analysis presented here reflects both an update to include data from 2017 and also corrects the data from 2010 to 2016.
- Further explanation of the groupings of the applications and orders along with the distinction between ‘cases’ and ‘cases by child’ is also provided (p54 and Appendix 1).
- The addition of a further table has shifted the table numbering in the latter part of the report.

Summary

- This report analyses published data from the Looked After Census and the Children Receiving Care and Support to explore why it is that Wales has higher rates of children looked after than the other UK nations.
- Previous work has identified factors associated with features of the population; differences in policy and practice; the role of parenting capacity and resources which explain some of the variation at a local level. Our analysis explores these using publicly available aggregate data.
- There are strong (but not necessarily causal) relationships with deprivation with more deprived areas typically having higher rates of children looked after and higher spend per head on Children Looked After Services. Just over half of the variation in the local authority rates can be explained by their extent of deprivation. Whilst deprivation was also found to explain 28% of the variation in the spend per head.
- It has been acknowledged that there are substantial differences in policy and practice between local authorities. Qualitative approaches are required to unpick differences in priorities, approaches and cultures. However, there are notable differences in the composition of the children receiving care and support cohort, with some authorities having significantly higher proportions of children who are either looked after or on the child protection register. These differences account for around 19% of the variation in local authority rates of children looked after.
- The decisions of the family court are also considered with analysis identifying that applications for care orders are occurring at a higher rate in Wales than England, and that the conversion rate into resulting care orders is also higher.
- Almost three-quarters of children looked after in Wales are placed with foster carers, and in the last 15 years the number placed with kinship carers has almost doubled. However, as the numbers of children looked after have increased, there has been an increase in the use of independent foster agencies and out of county placements.
- The ability of parents to appropriately support their child's development and keep them from harm forms a key part of the assessment process, with the 'trigger trio' (formally the 'toxic trio') of domestic abuse, parental substance misuse and parental mental ill health particularly diminishing parental capacity. It is estimated that around 24% of the variation in local authority rates can be attributed to the 'trigger' trio.

Key Messages

In 2018, there were 6,405 children looked after in Wales, almost 1,900 more children than were looked after in 2006. Over that time Wales has consistently had more children looked after per 10,000 of the population than the rest of the UK, and that gap has widened.

Within Wales, while most Local Authorities (LAs) have seen a rise in both the number and rate of children looked after, there is significant variation; and some have seen the rate of children looked after fall since 2014. Using published data, this report explores what we can say about the factors that are driving these trends.

Features of the local population

The characteristics of the local area and its population play a significant role; our work suggests:

- Levels of deprivation are correlated with the rate of children looked after. We estimate that just over 53% of the variation in rates among LAs is linked to the differing levels of deprivation in their areas.
- Population change does not appear to help explain the trends observed. Nationally, the child population in Wales has reduced by 0.2% since 2014, while the number of children looked after has increased by 11.5%. The distribution of these is uneven across Wales, but no observable relationship between them emerges from our analysis.
- Trends in the age distribution of the children looked after population show that under 1s, 10-15 year olds, and 16-17 year olds account for most of the growth in the numbers of children looked after, but the rate of growth in 16-17 year olds, particularly from 2010, is notable.

'Parental' factors

Our analysis of the data on the capacity of the parents of looked after children reiterates the findings of previous work on the significance of certain 'parental factors'. We have compared those children receiving care and support from a LA with the children looked after population, and have found that children in Wales are more likely to be looked after where one or both of their parents:

- Have learning disabilities: a child is more than twice as likely to be looked after, compared to receiving support in the family context.
- Have an alcohol or substance misuse issue: a child is almost twice as likely to be looked after.
- Have mental ill health: a child is 44% more likely to be looked after.

- Are experiencing domestic abuse: a child is 29% more likely to be looked after.

Previous research has highlighted the importance of the ‘trigger trio’ of parental factors – domestic violence, substance misuse and parental mental health. The presence of one or more of these increases the likelihood that a child will be looked after. We sought to examine the extent to which the presence of these factors contribute to the observed variation within Wales. Our analysis suggests:

- Around 24% of the variation among Local Authorities in Wales could be attributable to the ‘trigger trio’¹; the extent to which this can be linked to the prevalence of these issues within the local population and/or the way in which the local authorities respond to this need is unclear.
- The same analysis suggests that, of the ‘trio’, parental mental health and domestic abuse are the biggest contributing factors to the variation among LAs (mental ill health accounts for 25% of the variation and domestic abuse 21%).

Variance in policy and practice

We sought to examine whether and to what extent variance in local practice is contributing to variance in local rates of children looked after. From this a few key messages emerge:

- Variance in Local Authority practice, and the decisions of the judiciary, both contribute to the observed difference in children looked after rates across Wales; and to the divergence between Wales and England. Publicly available data does not allow for analysis of the degree to which these differences in local policy and practice account for this variance.
- Since 2010 Local Authorities in Wales have submitted applications for care orders at a higher rate than LAs in England; and a higher rate of care orders result from these than do in England. It is not clear why this should be the case.
- There is a relationship between the children looked after rate in a LA, and the proportion of children receiving care and support who receive more intensive support (i.e. are either looked after or on the child protection register). Our analysis suggests that around 19% of the variance in the children looked rate across Wales is attributable to difference in practice; and especially differences in the interpretation of thresholds for different levels of care and support.

¹ In the absence of a measure in the public domain which provides the proportion of children looked after (based on the CRCS Census) in each local authority experiencing one or more of the ‘trigger trio’ a score has been created by summing together the respective proportions on 31st March 2018 who experienced parental mental ill health, parental substance misuse and were subject to domestic abuse. This score out of 300 has been used as a crude measure.

We also analysed trends in **placement type**, which shows that as the number of children looked after has increased, there has been:

- a) The increase in the number of placed in foster care, although the growth in foster placements has not kept pace with overall growth in numbers of children looked after; with the consequence that the proportion of children looked after in foster placements has fallen slightly over since 2014; and
- b) More significantly, an increase in the numbers and proportion of children being placed with their family (either parents or others with parental responsibility).

This is in the context of an approximately 10% decrease in the numbers of children looked after being adopted over the same period.

Local Authority Spend

Our analysis explored the relationship between levels of LA spend on children and families' services (which includes spend on children looked after services) and a number of different factors:

- Population size: other research has suggested a link between spend and the population of 0 - 25 year olds in an area. We found no evidence of a relationship
- Disposable household income: it has been suggested that higher levels of disposable income are linked to higher levels of LA spend. We found evidence of the reverse – in Wales spend per child decreases as the average household income increases.
- Levels of unemployment: higher unemployment is linked to higher levels of spend
- Levels of crime: higher levels of crime are linked to higher levels of spend.
- Deprivation: higher spend is linked to higher levels of deprivation. Spend on children and families' services is strongly linked to levels of deprivation (accounting for 60% of the variation across LAs in Wales). Deprivation is also linked (although less strongly) to the proportion of spend on children looked after services.

Introduction

Since the early 1990s, the total *numbers* of children looked after² have increased in Wales and England, with the *rates* of children looked after per 10,000 children also rising in both countries. Whilst this has occurred at the same time as changes to the general population, as the Care Crisis Review highlights, 'the national average rates of looked after children have been consistently higher in Wales than England' (Thomas, 2018). More recent data suggests that this gap is continuing to widen (Welsh Government, 2018c; Department for Education, 2018).

Within both Wales and England, there is considerable variation between the rate of children looked after per 10,000 child population, with many of the Welsh local authorities having higher rates with those in England. Many reasons for this trend are cited - from risk aversion amongst social workers in the face of high profile cases such as Peter Connelly (Baby P); to growing awareness and expectations of action on issues such as child sexual abuse and exploitation; to stretched services not having the capacity to intervene until crisis point; and to differences in the underlying population. However, the 'gap' between Wales and England pre-dates austerity and in the years immediately prior to the 'Baby P effect' (BBC, 2008) overall numbers were decreasing in England whilst in Wales they were already being to rise. Together, these suggest that there are potentially factors at play which are indicative of diverging practice.

Experts are divided as to whether the high rates of children coming into care evidences a system that is working. Some argue that more children who are at risk of harm are now being protected, with those in care having more positive outcomes than they would if they were not taken into care (Oakley et al., 2018). Conversely, others argue that higher rates is negative since, on average, the educational and health outcomes for children looked after are poorer than those in the general population. There is also moral argument which recognises the importance of maintaining links to birth families. As such the issue of whether there is an optimal size for the population in care is contested, with recent research in Wales suggesting that 'there is no 'magic number' for the rate of looked after children in a local area that would determine whether numbers were 'too high' or too low' (Cordis Bright, 2013 cited in Thomas, 2018). Rather it is suggested, as was done in the Care Crisis Review, that policy and practice should be driven by the continuing need to make decisions about care on the basis of individual needs and best interests. Despite this moral imperative, there is growing concern that the increased numbers being looked after is placing a strain on already tight local authority budgets. The statutory duty to safeguard and promote the well-being of

² Throughout this report references are made to 'children looked after' rather than 'looked after children' since the label 'looked after child' and particularly the shortened version of 'LAC' can give the impression of children lacking in something. However, in some instances it has been necessary to use the term 'looked after children' as it is a statutory term used by the Welsh Government. Notably the Looked After Children Census has been abbreviated to LAC Census.

looked after children means that in order to support children and their families, challenging budgetary choices are now needing to be made (WLGA and ADSS Cymru, 2018).

This report utilises aggregate data to explore factors which have been suggested within academic and grey literature for the differing rates, and in doing so seeks to inform the debate about how we could safely reduce the numbers entering care in Wales.³

Given that there are legislative differences between Wales and the other UK nations, information about these differences is set out in the first section of the report along with an overview of the relationship between looked after children, child protection cases and other children receiving care and support. This section also sets out where there are differences in the data collection processes and the extent to which the resulting data is made publicly available.

Trends over time are then presented based on an annual snapshot of the numbers looked after as at the 31st March each year, with comparisons provided both with the other UK nations, and also within Wales. Since the legislative framework was, until recently, the same as that in England, analysis is provided which enables comparisons to be made at both a local authority level and in relation to the English regions. This data highlights the extent of the variation, setting out why this has become a policy concern.

Possible explanations for the higher rates are discussed in the second section of the report. These are grouped thematically and include a focus on features of the population such as population change and deprivation; policy and practice which includes data relating to the family courts; and parenting capacity. This section draws upon and where possible updates earlier work such as that by Cordis Bright (2013), the Child Welfare Inequalities Project (Elliott and Scourfield, 2017) and the analysis undertaken using individual level data by Elliott (2017) which have looked specifically at the situation in Wales. This is supplemented by research that has focused on trying to explain differences in the rates of children looked after in England.

The final section considers the links between local authority spend on looked after children services and factors such as deprivation. This is a topic that has been explored in a number of recent reports such as National Audit Office (2019); the Institute for Fiscal Studies (Kelly et al., 2018); the Local Government Association (Lum and Tregidgo, 2018) and the Public Accounts Committee (2018). As the pressure of austerity continues to bite, the cost of corporate parenting remains a key policy concern.

³ The analysis is limited by the nature of the data and its availability (it has been necessary to utilise published data, but local authorities hold more detailed data). The implications of this are explored in what follows.

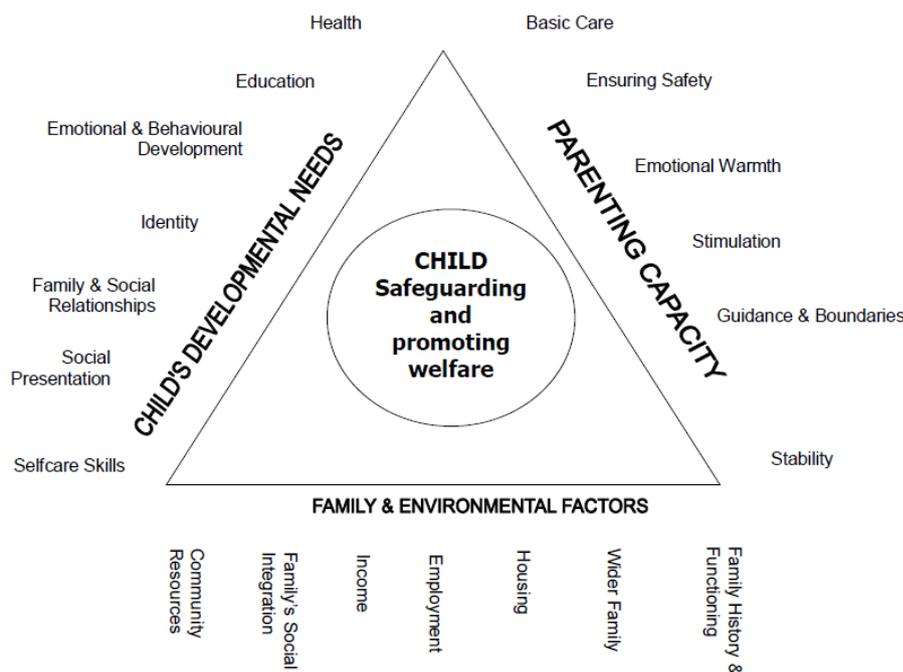
The Legislative Context

The UK legislative framework relating to children looked after continues to evolve, with each of the four nations now having its own legislation. This section therefore outlines the situation in Wales for those not familiar with more recent developments and the resulting terminology associated with these.

The Social Services and Well-being (Wales) Act 2014 came into effect on 6 April 2016. It provided a new legal framework, bringing together and modernising social services law in Wales. The Act changes the way people’s needs are assessed and the way services are delivered, introducing new duties on local authority social services in relation to assessment and provision of care and support. Section 17 of the Children Act 1989, which defines ‘Children in Need’, was repealed. As a result, the Children in Need Census is no longer conducted (although this remains in England where the 1989 Act still applies). It has been replaced by the ‘Children Receiving Care and Support’ (CRCS) Census and has new requirements. For example, data for unborn children are not collected. Since 2016-17 is the first year of collecting and hence reporting on data derived from the CRCS Census, the Welsh Government advise that comparisons with previous years should be avoided in many cases.

The Act changes the way people’s needs are assessed and the way services are delivered. It introduces a new process for assessment and care planning, although the framework for the assessment of children in need still forms the basis of any assessment. The Framework is summarised in Figure 1.

Figure 1: Framework for the Assessment of Children and their Families



Source: Welsh Government (2015: 35)

Under the 2014 Act, the assessment process often starts when a person accesses the Information Advice and Assistance (IAA) Service – the IAA is the ‘front door’ for accessing services provided by both adult and children’s services, and can be contacted by members of the public, partner agencies and other organisations as well as those involved directly in the care of, in this case, the child⁴. If the assessment determines that the child’s identified needs are eligible to be met by the provision of care and support from the local authority, a care and support plan is developed and agreed.

‘A child will be eligible for a service if:

1. the need arises from circumstances such as their age or health
2. and it relates to their personal well-being outcomes
3. and it cannot be met by their parents, wider family or community services
4. and it can only be met by their local authority arranging or providing the service or making direct payments.

If the child is eligible for a service, a Care and Support Plan will be agreed’.

Sections 37-39 Social Services and Well-being (Wales) Act 2014; Care and Support (Eligibility) (Wales) Regulations 2015 and Care and Support (Care Planning (Wales) Regulations 2015; Part 4 Code of Guidance

Of the 48,069⁵ assessments of need conducted in 2017-18, one in five (8,731⁶, 18%) led to a care and support plan. These figures represent a 20% increase in the number of assessments undertaken during 2016-17. However, a smaller proportion led to a care and support plan (Welsh Government, 2018d).⁷In addition to preparing a care and support plan for the child concerned, local authorities are required to review the plans to understand whether the provision of care and support is meeting the identified needs of the child and consider if their needs have changed.

⁴ Due to technical issues, it is not possible to get a complete picture of the number of children and families who received advice or assistance from the Information Advice and Assistance (IAA) Service during the year. However, during 2017-18, based on the 21 authorities that provided data, 41,6354 children (or families) received advice and/or assistance in relation to the child’s own care and support or that of their friend/ family member/ person they care for/ advocate for Welsh Government (2018d).

⁵ Caerphilly and Newport were only able to provide data up until 13th February 2018 and 6th March respectively with regards to the number of assessments undertaken. Vale of Glamorgan was unable to provide data for 2017-18.

⁶ Denbighshire was unable to provide data for both 2016-17 and 2017-18 whilst the Vale of Glamorgan was unable to provide data relating to the number of assessments leading to a care and support plan for 2017-18 due to ICT issues.

⁷ It is not immediately clear what explains the change between 2016-17 and 2017-18; but it is likely that some proportion of this will be due to the introduction of new reporting requirements. The Social Services and Well-being (Wales) Act commenced in April 2016 which resulted in changes in the way in which people’s needs are assessed. New reporting requirements were developed to reflect this.

Where there are concerns that a child may be at risk, enquiries are made which may result in a formal investigation and assessment. This can potentially involve a number of different agencies including the police, health or education. Where necessary, immediate action can be taken to ensure the child or young person is protected and safe from harm.

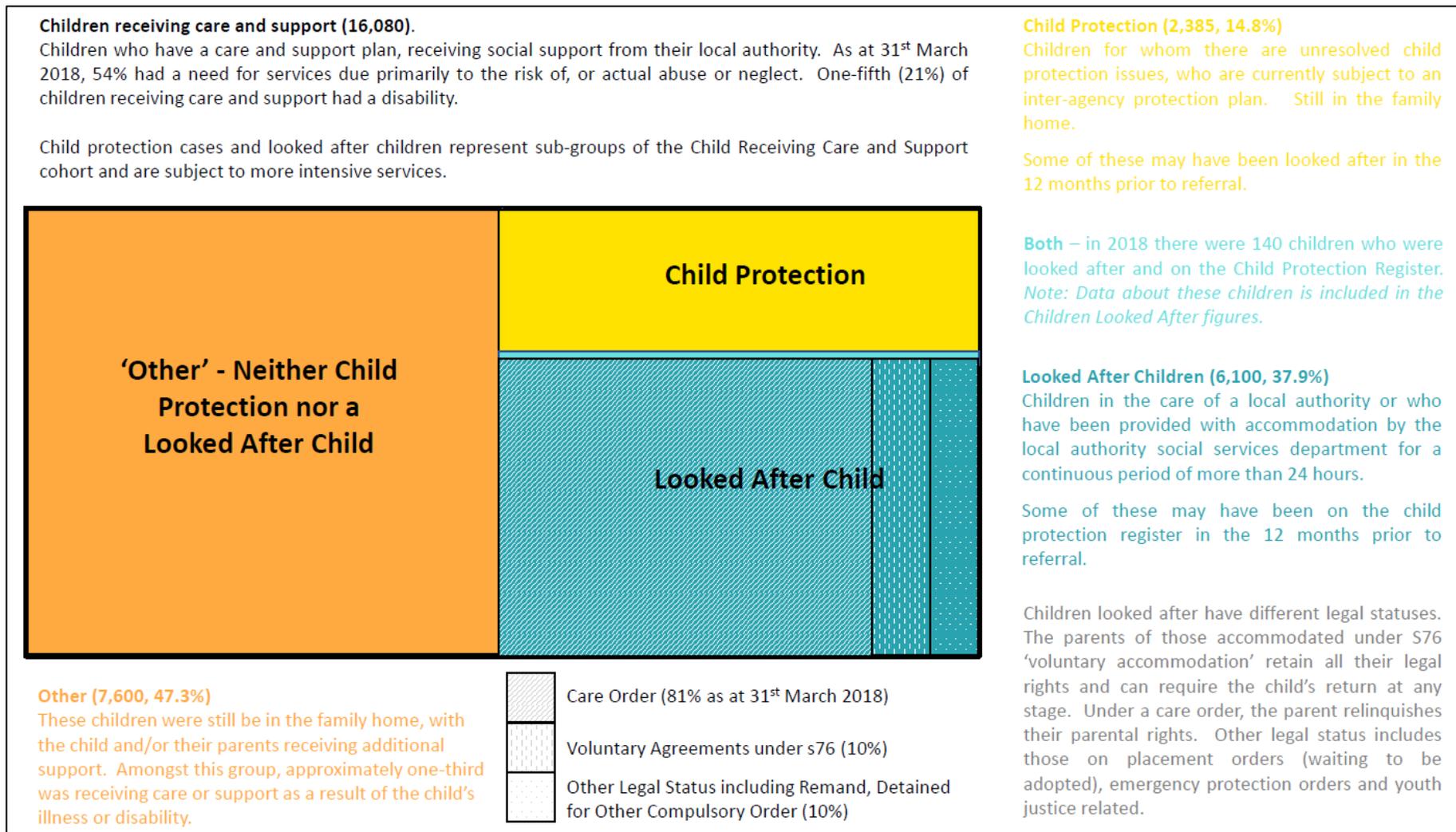
Within the CRCS cohort are two sub-groups:

- Children on the Child Protection Register - Under section 47 Children Act 1989, a local authority has a duty to investigate if it appears to them that a child in its area is suffering or is at risk of suffering significant harm. The threshold for an investigation is that the local authority has 'reasonable cause to suspect' significant harm, or where the child is subject to an emergency protection order, or is under police protection. In these circumstances, the local authority must make enquiries as to whether any action is needed to safeguard or promote the child's welfare. In Wales, applicable statutory guidance for all agencies on responding to concerns that a child may be at risk of harm is still the 'Working Together' guidance published in 2004. However, this has been supplemented by a range of non-statutory guidance known as the All Wales Children Protection Procedures
- Children looked after – Sections 20-30 Children Act 1989 apply to looked after children in England. From April 2016, this part of the Children Act no longer applies in Wales with sections 20-30 being replaced by Part 6 of the Social Services and Well-being Act 2014. Children may become looked after either through agreement under section 76 (previously section 20 1989 Act) or under a court order.

It is this latter group of children looked after that are the focus of this report. However, given the links between the two sub-groups, reference is made to what can be considered to be the wider 'safeguarding cohort' which consists of both those on the Child Protection Register and Looked After Children. Figure 2 summarises the relationship between children receiving care and support, those on the child protection register and children looked after in Wales. To give an indication of the respective proportions within the children receiving care and support, the position is given as at 31st March 2018 (Stats Wales, 2019d). This is supplemented by data relating to the legal status of the children looked after from the Looked After Children (LAC) Census (Stats Wales, 2018b) which whilst using slightly different inclusion criterion⁸, uses the same date for its snapshot.

⁸ Only those with a care and support plan in place on or before the 1st January and remaining at 31st March are included in the CRCS Census whereas the LAC Census does not make this specification. The resulting numbers from the LAC Census are typically not that dissimilar to those from the CRCS Census. The exception is the rate for the Vale of Glamorgan where on 31st March 2018 there was a difference equivalent to 125 children. The previous year, the difference was equivalent to 90 children.

Figure 2: The Relationship Between Children Receiving Care and Support, the Child Protection Register and Looked After Children (31st March 2018)



Note: The headline number of children looked after reported here differ from those provided in Table 4 as they are drawn from different sources (the CRCS Census and the LAC Census respectively).

Comparative Data: Children Looked After

In seeking to compare the situation in Wales with that for the rest of the UK in terms of the rate of children looked after, it is important to note that direct comparisons between the four different countries is limited by the absence of a common dataset⁹. This stems from:

- Legislative differences which may result in some children being counted as 'looked after' in one country who would not be counted as looked after in the other countries of the UK
- Differences in the data items collected (Table 1) and published by the different administrations.

England is the only country to publish statistics on all children looked after at any time during the year. However, all four countries provide a snapshot of children looked after, with the timing being the same for all (31st March) bar Scotland (31st July).

Table 1: Comparisons in Data Collected and Published across the UK

	Wales	England	Scotland (31 st July)	Northern Ireland
Age	✓	✓	✓	✓
Gender	✓	✓	✓	✓
Ethnicity	✓	✓	✓	✓
Disability status			✓	✓
Religion				✓
Unaccompanied Asylum Seeker		✓		
Motherhood status		✓		
Legal status	✓	✓	✓	✓
Category of need		✓		
Placement type	✓			✓
Type of foster placement	✓	✓	✓	
Placement provider	Foster Only	✓	✓	
Number of placements during year	✓	✓	✓	
Distance between home and placement		✓		
Reason for change of placement		✓		
Starts, by category of need	✓	✓		
Starts, by age group and gender		✓	✓	✓

⁹ A report by the Scottish Government provides more details:

<https://www2.gov.scot/Topics/Statistics/Browse/Children/sourcesandsuitability/SourcesAndSuitabilityCLAS/LACComparabilityUK>

	Wales	England	Scotland (31 st July)	Northern Ireland
Starts, by ethnicity		✓	✓	
Starts, by disability status			✓	
Starts, by legal status		✓		✓
Starts, by placement		✓		✓
Duration in care		✓	✓	✓
Ceasing to be looked after, by age group and gender		✓	✓	✓
Ceasing to be looked after, by ethnicity		✓	✓	
Ceasing to be looked after, by disability status			✓	
Ceasing to be looked after, by legal status		✓		
Ceasing to be looked after, by placement		✓		
Reasons for leaving care/ Episodes ending		✓		
Destination upon leaving care	✓		✓	
Adoption of LAC		✓		
Special Guardianship		✓		
When I am Ready / Staying Put / Going the Extra Mile	✓	✓		✓

Notes: Supplementary material is typically made available at a local authority / district level in tabular form. From April 2016, young people in Wales have a right to stay with their foster families beyond the age of 18, known as the When I am Ready scheme. This change to the law came into force with the Social Services and Well-being (Wales) Act 2014, and is the result of a joint campaign between The Fostering Network and Action for Children. Staying Put and Going the Extra Miles are equivalent schemes in England and Scotland respectively. The young people are no longer looked after.

Children looked after exclusively under short breaks, who normally live at home but are accommodated by a local authority in a series of short periods of care, are excluded from the presented figures. They represent a special group accommodated for within the legislation with only those children whose short breaks are provided under Part 6, section 76 of the 2014 Act becoming looked after. In order to become looked after, the accommodation must be provided for a continuous period of more than 24 hours. As at 31st March 2018 there were 235 children looked after under respite arrangements, 70% (165) of whom have a disability. However, respite breaks can also be provided for those where the family is in acute stress (15%, 35 children); as a result of parental illness or disability (4%, 10 children) or for other reasons (13%, 30 children). At the time of the LAC Census, these were broadly divided between foster care provision (45%) and local authority homes (40%), with a further 15% in other placements.

In the case of Wales, data on children looked after has been collected through the LAC Census since the introduction of the Social Services and Well-being (Wales) Act in April 2016. Prior to this, data was collected as part of the SSD903 return with the collection adhering closely to the definition of looked after children provided by the Children Act 1989 in England and Wales. This is an individual level return. However, data is published at an aggregate level.

The children looked after figures from the CRCS Census (which replaced the Children in Need Census in Wales) are broadly consistent with those from the LAC Census, with those areas with higher rates of children receiving care and support generally having higher rates of looked after children per 10,000. Since these provide a snapshot of the data on 31st March, it is possible to draw on information from both data collections for 2017 and 2018.

Table 2: Comparisons between the Key Data Collections in Wales

	Looked After Children Census (2003-2018)	Children Receiving Care and Support Census (2017-2018)	Children in Need Census (2003-2016)
Rate per 10,000	✓	✓	✓
Age	✓	✓	✓
Gender	✓	✓	✓
Ethnicity	✓	✓	✓
Disability		✓	✓
Legal status	✓		
Placement type	✓		
Foster placement type	✓		
Number of placements	✓		
Child status (LAC / CP / Other)		✓	✓
Health of Child and Other outcomes data		✓	✓
Category of need	Starts during year only	✓	✓
Parental factors		✓	Referral factors
Most recent referral source			✓
Reasons for finishing	Episodes ending during year		

Whilst the 'default' source is to utilise the data from the LAC Census, especially when considering trends, the inclusion of the child status measure enables us to consider how many of those from the CRCS Census are looked after. Although there are differences due to the inclusion criterion (see footnote page 12), the fact that they are broadly consistent means that indicative information is also available about the children looked after cohort in terms of disability, the mental health of the child and the recorded main category of need at the start of their current episode. Notably, the CRCS Census provides information about parental mental ill health; physical ill health; learning disabilities; substance misuse and whether there have been domestic abuse problems which have been used in the second part of this report to try to understand the role that these play in explaining the difference in the local authority rates within Wales.

The key disadvantage with using the CRCS Census data is that as previously highlighted, this was collected for the first time in 2016-17. There are therefore only two releases

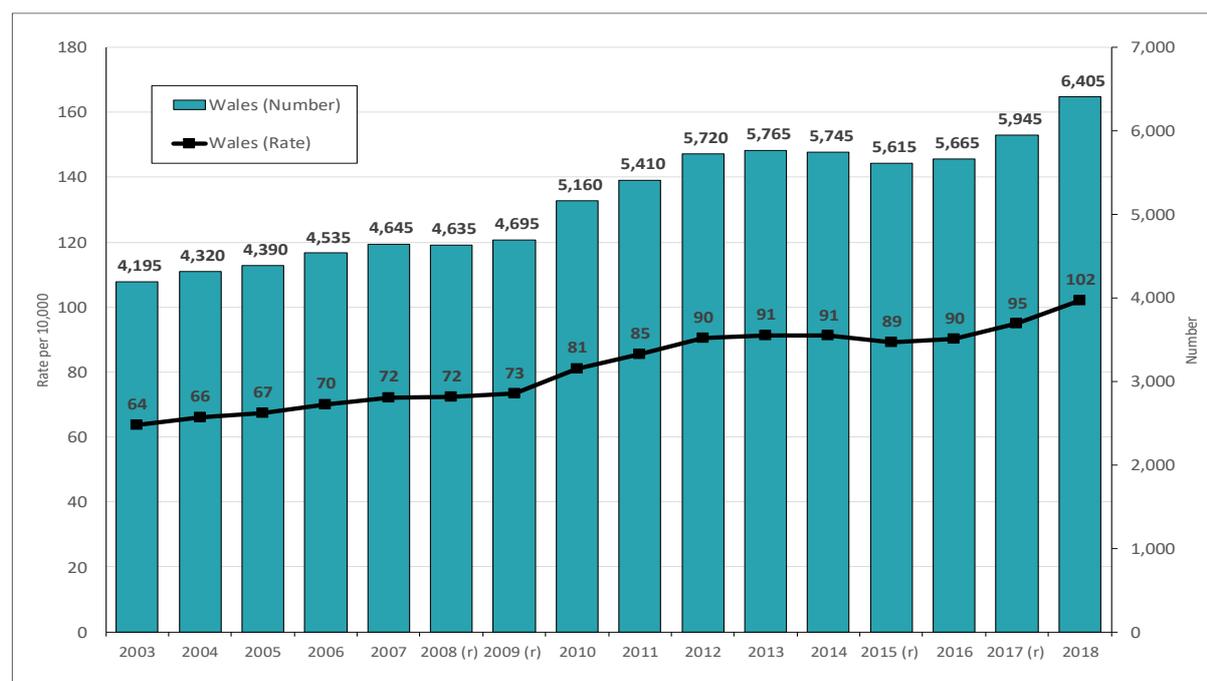
available for analysis which limits the extent to which trends can be monitored. Whilst the Children in Need Census collected comparable information with the same snapshot, the current advice from Welsh Government is not to use this to make comparisons over time. Consequently, it is not possible for example, to establish whether or not there has been an increase in the presence of each of the parental factors in recent years from a consistent source. This will be explored in more detail in the Parenting Capacity section.

The Rate of Children Looked After in Wales

Using data from the LAC Census and its predecessor, the SSDA903 return, it is possible to look at trends over time. This section summarises the position in Wales relative to elsewhere, providing context for the remainder of the report. Notably, the data shows that Wales has consistently higher rates of children in care, compared to England in particular, with individual Welsh authorities tending to have higher rates of children looked after than their English counterparts.

As at 31st March 2018, there were 6,407 children looked after in Wales, an increase of 464 (8%) on the previous year. This is equivalent to a rate of 102 per 10,000 population aged under 18.

Figure 3: Number and Rate of Children Looked After in Wales



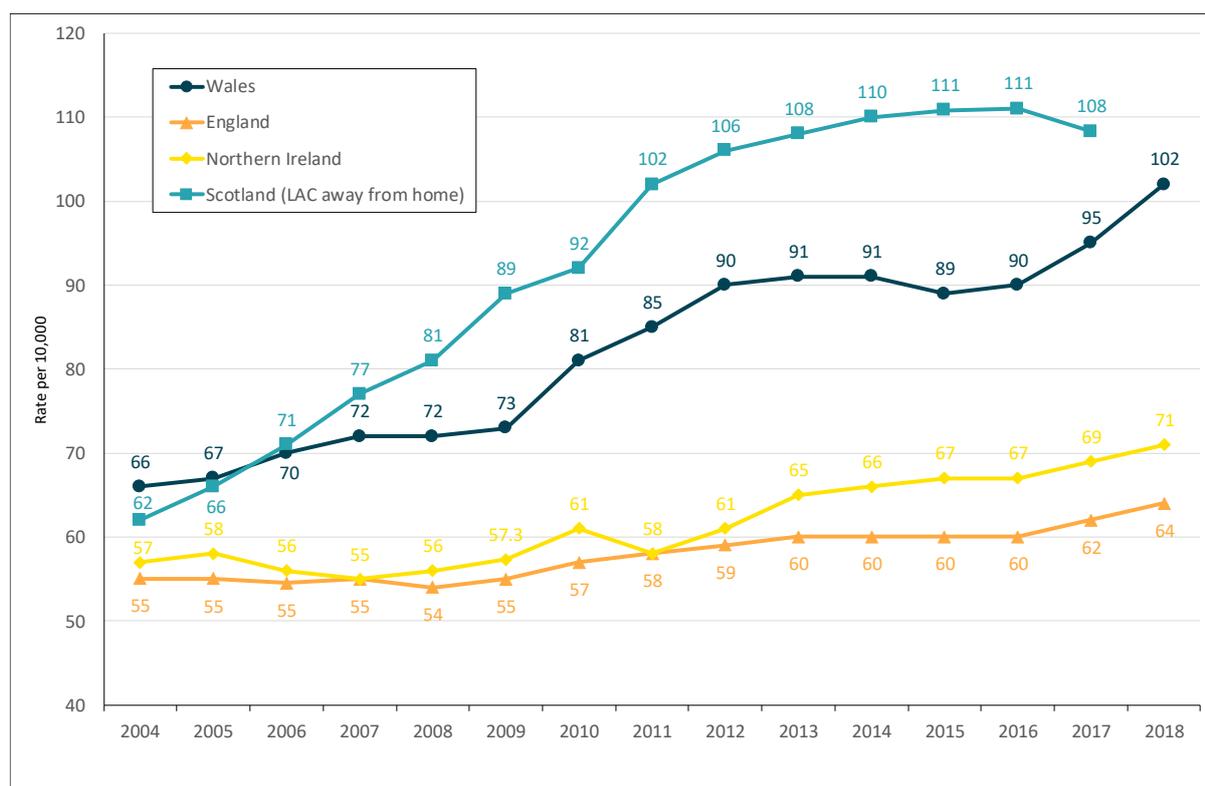
Source: Looked After Children Census, Stats Wales (2018d) and (Stats Wales, 2018f). Note: The data on Stats Wales is rounded to the nearest 5 and is subject to suppression. (r) reflects where data has been revised since it was previously published by the Welsh Government.

Whilst there are some differences in the definition of ‘looked after children’ across the countries within the UK which make comparisons difficult, the Scottish Government (2018a) have published comparative data relating to the rates across the four countries which suggests that the rate in 2016-17 for Wales (95 per 10,000) was higher than that for

Northern Ireland (69 per 10,000) and England (62 per 10,000) whilst the equivalent rate for Scotland was 108 per 10,000.¹⁰

Equivalent data is not available for all four nations for 31st March 2018. However, Wales, England and Northern Ireland have all experienced increases, with the gap widening. Notably, as can be seen from Figure 4, between 2013 and 2017, there have been increases in the rate of children looked after in Wales, England and Northern Ireland, whilst in Scotland the rate has remained fairly stable.

Figure 4: Comparisons of the Rate of Children Looked After, by Country



Source: Scottish Government (2018b) supplemented with data for 31st March 2018 from Stats Wales (2018f), Department for Education (2018) and Department for Health (2018). Equivalent data for Scotland is not currently available.

The increase in the rate of children looked after in Wales relative to 31st March 2017 means that there are now an additional 7 children per 10,000 looked after whereas in both England and Northern Ireland there are only an additional 2 children per 10,000. In terms of the size of the cohort, compared to the previous year, the number of children looked after on 31st March in both England and Northern Ireland increased by 4%. Had Wales similarly experienced only a 4% growth in the size of the children looked after cohort, there would be

¹⁰ In Scotland, children placed at home require a supervision order from the children's panel, whereas in England and Wales, being looked after at home is an informal situation put in place by a social workers, often as an interim measure until a foster or kinship care placement can be found. The Scottish Government report provides figures both including and excluding children looked after at home. To improve comparability, the Scottish figure has been calculated as at 31st March rather than 31st July. In 2017, the Scottish LAC at home rate was 37 per 10,000 whilst that for LAC away from home was 108 per 10,000. The overall rate was 145 per 10,000.

210 fewer children – 6,195 rather than the 6,405 recorded, equivalent to a rate of 99 per 10,000 rather than 102.

Comparing the long-term trends in England and Wales where the legal framework was until recently the same, highlights that the rate of children looked after is growing at a faster rate in Wales than in England and hence the gap is increasing. The rate in Wales also compares unfavourably with that for each of the English Regions (Table 3).

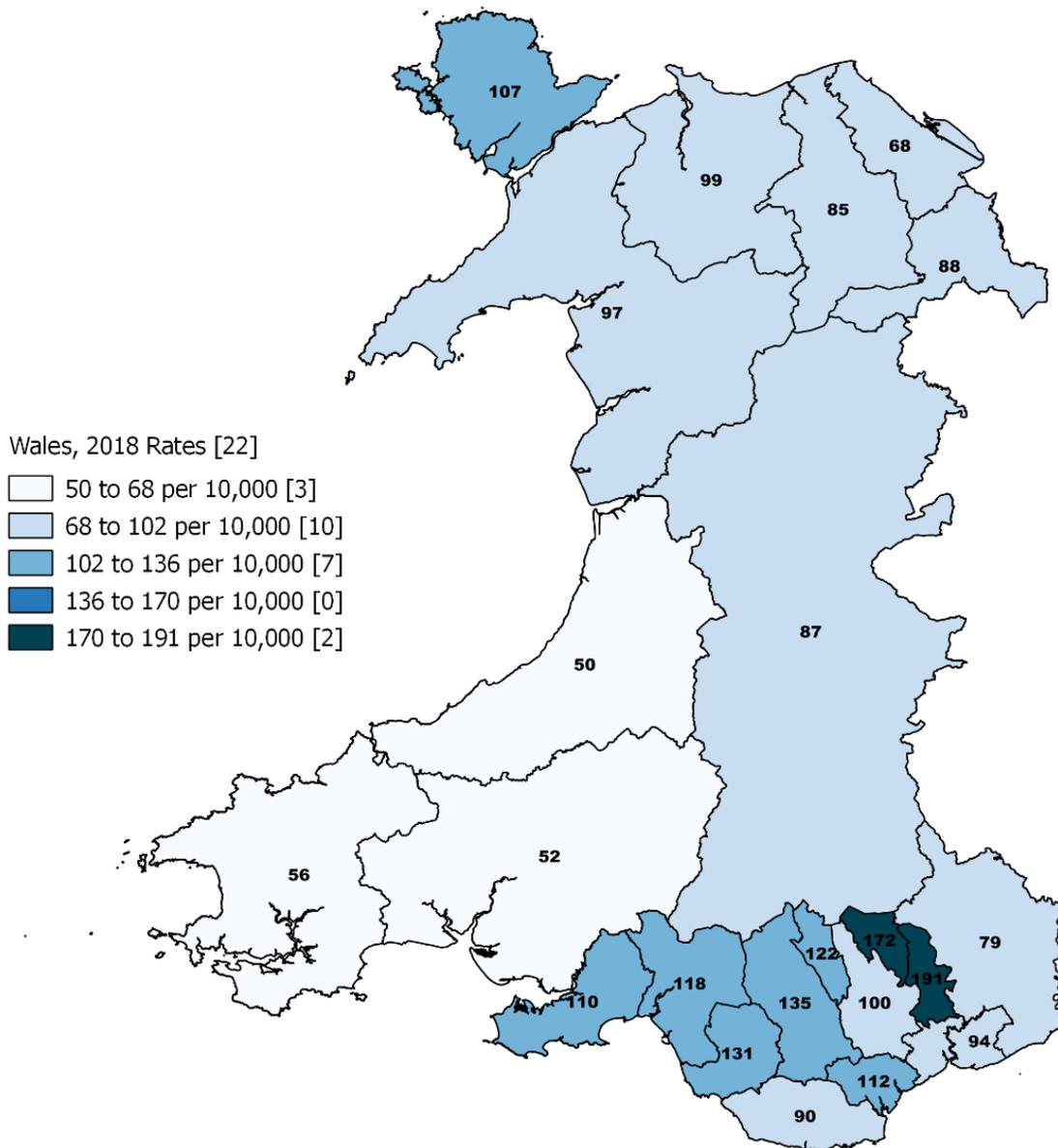
Table 3: Comparisons of the Rate per 10,000 Children Looked After, by Region Across England and Wales

	2014	2015	2016	2017	2018	Net Change
Wales	91	89	90	95	102	11
North East	81	81	84	92	95	14
North West	81	82	82	86	91	10
West Midlands	73	74	73	75	78	5
Yorkshire and The Humber	65	64	63	67	71	6
England Average	60	60	60	62	64	4
East Midlands	51	53	53	55	57	6
South West	51	52	53	53	55	4
South East	47	49	51	51	51	4
East of England	50	48	49	49	49	-1
London	54	52	51	50	49	-5

Source: Additional Tables, Children looked after in England, year ending 31 March 2018 (Department for Education, 2018) and Stats Wales (2018f). Note: The number of children looked after can be found in Table 5.

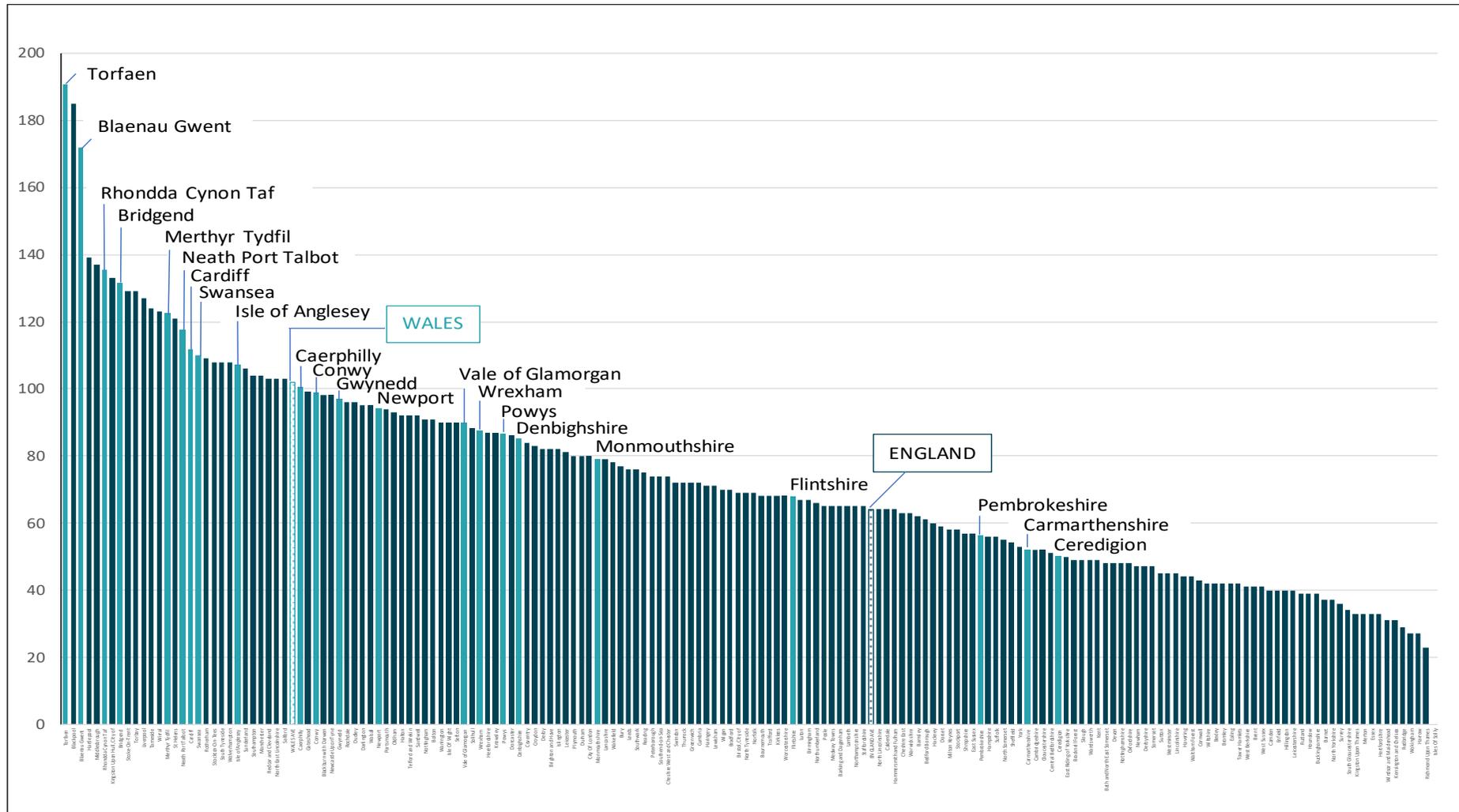
Within each of the countries there is also considerable variation at a local authority level, with the rate in Wales ranging from 50 per 10,000 in Ceredigion to 191 per 10,000 in Torfaen as at 31st March 2018 (Figure 5). When the local authority rates are compared against those across England, the extent of the disparity is also revealed (Figure 6).

Figure 5: Rates of Children Looked After, by Welsh Local Authority, 2018



Source: Looked After Children Census, Stats Wales (2018f)

Figure 6: Local Authority Rates of Looked After Children in England and Wales, 2018

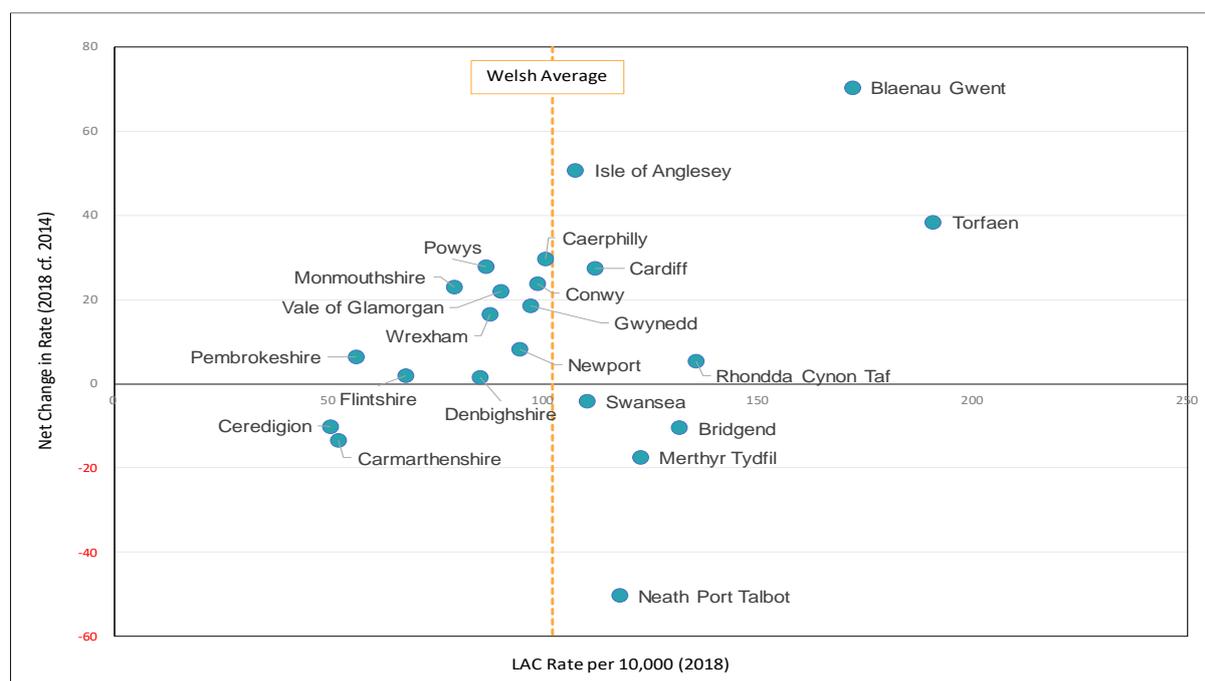


Source: Wales – Looked After Children Census, summary data from Stats Wales (2018f). England – SSD903, local authority level tables published alongside the statistical release, Department for Education (2018).

As highlighted in Figure 4, the rate in Wales has been notably higher than that in England since 2004. However, as Figure 5 highlights, this average masks the degree of variation within Wales.

Between 2014 and 2018, the rate of children looked after across Wales increased from 91 per 10,000 to 102 per 10,000 – equivalent to an additional 11 children per 10,000 being looked after. However, within Wales, some local authorities saw their rates decrease whilst other saw increases. As can be seen from Figure 7, the two local authorities with particularly high rates as at 31st March 2018 are amongst those that have also experienced the greatest net change in rate over the 5-year period. Notably, Blaenau Gwent (increasing from 102 to 172 per 10,000, equivalent to an additional 70 children looked after per 10,000), Torfaen (from 152 to 191, +38) and Isle of Anglesey (from 57 to 107, +51) have experienced greater net changes than the Welsh average and, particularly in the case of Blaenau Gwent and Torfaen, have significantly higher rates in 2018. Had these three local authorities not seen an increase in their rate of children looked after over the 5 year period (i.e. had remained at the 2014 rate) the combined impact would have resulted in the Welsh average being 97 per 10,000 rather than 102 in 2018.

Figure 7: Net Changes in the Rate of Children Looked After, 5 Year Trend (2014 compared to 2018)



Source: Looked After Children Census, Stats Wales (2018f)

Neath Port Talbot in contrast has seen the largest net decrease – from 168 per 10,000 to 118, equivalent to 50 fewer children being looked after per 10,000. Whilst the rate remains above the Welsh average, if we are to understand more about the national differences, then gaining an insight into why and notably what has brought about this reduction can enhance our understanding of why there are national and sub-regional variations.

Potential Explanations for the Higher Rate in Wales

Whilst Wales is not unique within the UK in terms of the unprecedented growth in the numbers of children looked after, the trends summarised in the previous section highlight the extent to which the overall Welsh rate of children looked after differs from that in England and Northern Ireland, with a similar pattern being evident at the individual local authority level. Three key pieces of work have sought to explain the variation in the rates within Wales:

- Research on Differences in the Looked After Children Population (Cordis Bright, 2013);
- The Child Welfare Inequalities Project (Bywaters et al., 2014) which has produced a specific report on Wales (Elliott and Scourfield, 2017), and
- “Looked After” Children in Wales: An Analysis of the Backgrounds of Children Entering Public Care (Elliott, 2017) which is the only example utilising child level data within Wales.

Additionally, there have been a number of reports which have investigated differences between English local authorities which can inform thinking in Wales.

The quantitative analysis undertaken by Cordis Bright (2013) led them to assert that three key factors helped to explain some of the differences in rates of children looked after between local authorities, namely:

- Population size
- Deprivation
- Lone parent households

However, they found that the following factors did not explain differences:

- The age profile of the local population
- Average household sizes
- Population density
- The proportion of the local population from Black and minority ethnic groups
- Levels of housing overcrowding

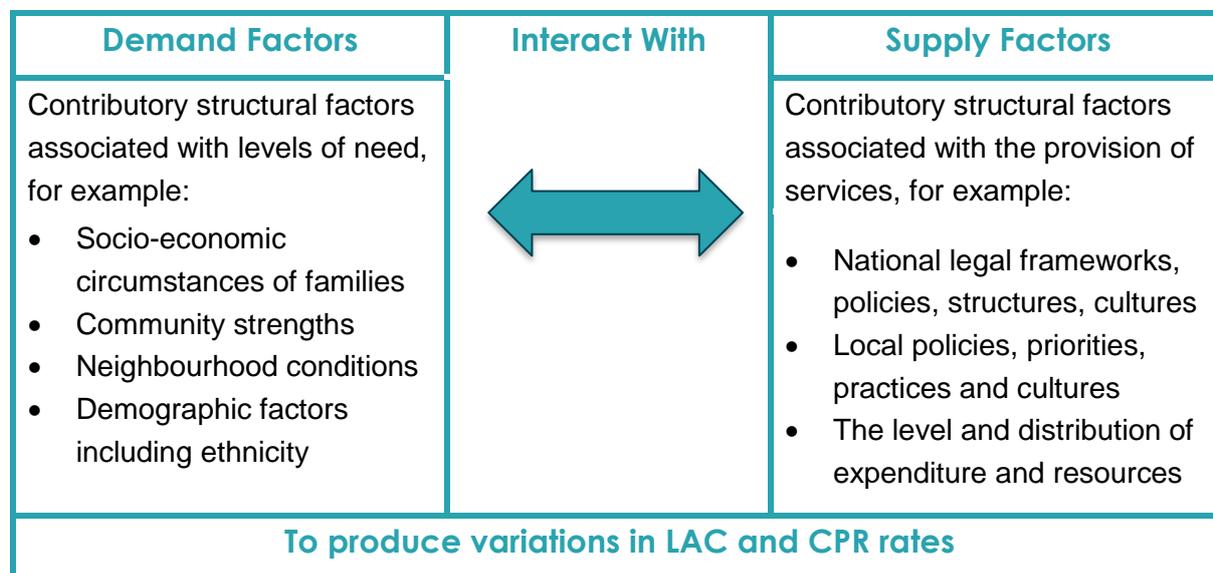
The report utilises aggregate data rather than information directly relating to the individual circumstances of those in the children looked after cohort (i.e. whether they came from a lone parent household or one considered to be overcrowded, or are from a BAME group). Unfortunately, the extent to which these issues can be explored is limited by the availability of individual level data. A key limitation when using published data is that it can be subject to

high levels of suppression and rounding. This is the case with the ethnicity data. As a result, it is not possible to get an accurate picture of the distribution of the 505 members of the cohort identified as being non-White across the 22 local authorities.

The Child Welfare Inequalities Project has sought to identify the relationship between child welfare intervention rates and a range of factors particularly levels of deprivation and policy/practice. As such it considers both children looked after and child protection cases, providing comparisons between the situation in each of the four UK countries.

The analysis undertaken in producing the Wales report (Elliott and Scourfield, 2017) utilised individual level data from the SSDA903 return for the census date of 31st March 2015 and child protection registrations. As such it was possible to consider the distribution of these children by deprivation decile of the Welsh Index of Multiple Deprivation (WIMD 2014). This established that there is a clear social gradient whereby children in the 10% most deprived lower level super output areas (LSOAs) were found to be 16 times more likely to be subject to child welfare interventions than those in the 10% least deprived. Using a UK wide measure of multiple deprivation¹¹, it has been established that the social gradient in Wales is steepest of all four nations. The social gradient in Northern Ireland was identified as being the least steep with much lower rates of children looked after despite being more deprived (Child Welfare Inequalities Project, 2017).

Figure 8: Understanding Inequalities in Rates: Demand and Supply Factors



Adapted from Child Welfare Inequalities Project (2017)

¹¹ Each of the four UK countries has their own indices for measuring multiple deprivation in small population areas which are not directly comparable due to variations in the dimensions, indicators, weightings and scores used. The UK-based index of multiple deprivation was constructed for the project using the methodology outlined by Payne RA and Abel GA. (2012).

'Demand' in this context refers to the social determinants of childhood difficulties. As with health inequalities, family socio-economic circumstances, the quality of the environment and community in which children are being brought up and links with the demographic mix of the population are all contributory factors. The fundamental conditions for bringing up children (for example, money for essentials, adequate housing, social support), intertwined with other factors such as levels of domestic violence, substance use and parental physical and mental health, influence the proportion of children who might come to the attention of children's services in any given area.

However, it was also observed that considerable differences exist in responses to such needs as a result of a range of factors affecting the supply of services. Contributory supply factors include national policies, legal frameworks, and dominant attitudes, local priorities, the leadership, experience, skills and stability of the workforce, local professional and political cultures and the scale and distribution of resources available to children's and allied services. The extent to which many of these 'supply' side issues can be explored through the analysis of quantitative data is limited, although the final section of this report does provide a summary of the relationship between spend and factors which have been suggested as explaining variation in local authority spend.

This section therefore focuses on those issues around demand which can be examined using publicly available data, with the aim of highlighting where differences exist so as to stimulate debate. It is structured around three themes:

1. **Features of the population** such as population change, the relationship between deprivation and the rate of children looked after, and variations in the structure of the local population;
2. **Policy and Practice.** Drawing upon data from the CRCS Census, to consider where there may be differences in the 'threshold' for being taken into care rather than receiving care and support whilst remaining in the home. Analysis is also provided around the legal status of the child with data from the Ministry of Justice's PLATO Tool being used to explore whether there may also be variation as a result of decisions from the Family Court in terms of both applications for and, resulting rates of care orders.
3. **Parenting Capacity** considers the role played by factors which may be detrimental to the parent or carer's ability to respond appropriately to the child's needs and prevent them from harm. This includes a specific focus on the so called 'Trigger Trio' (previously the 'toxic trio') of parental substance misuse, parental mental ill-health and domestic abuse.

Issues relating to supply are touched upon within sub-sections on policy and practice, and parenting capacity. However, it is important to note that Elliott and Scourfield (2017) found no statistical evidence of an inverse intervention effect within Wales. This contrasts with the situation in England where there was evidence to suggest that that at a given level of

deprivation, there would generally be more intervention in those local authorities which are less deprived overall.

Features of the Population

The role of population change

The number of children looked after per 10,000 of the child population provides a mechanism for drawing comparisons across areas of varying population size. However, it has been argued by some (for example, Jay et al., 2017) that the rate per 10,000 children is impacted by the size of the child population – areas with large populations will be more robust to small changes in the children looked after, whilst in smaller areas, the same small changes in the looked after population can lead to big changes in the rate.

This can be seen by looking at Ceredigion (one of the smallest Welsh authorities in terms of its child population) and Swansea (the third largest), both of whom experienced a net reduction in the size of their children looked after cohort of 15 between 2014 and 2018:

- Ceredigion had an estimated 12,320 child population in 2017 – a decrease of 210 (1.7%) compared to 2014. Between 2014 and 2018, its children looked after cohort fell from approximately 75 to around 60 (a reduction of 20%), resulting in the local rate per 10,000 children decreased from 61 to 49 – equivalent to 12 fewer children looked after per 10,000.
- Swansea, also saw the size of their LAC cohort decrease by approximately 15 (from 535 to 520, -3%). Its considerably larger population size (estimated to be 47,270 in 2017) meant that its children looked after rate fell from 114 to 110 per 10,000 (4 fewer children looked after per 10,000).

Despite this, the rate per 10,000 children in the population remains the primary indicator of choice since the raw numbers do not allow comparisons between countries, regions and local authorities.

Table 4 provides a summary of the underlying data used to calculate the Welsh rates. This highlights a number of trends:

- Across Wales, the child population reduced by 0.2% whilst the size of the children looked after cohort increased by 11.5% - equivalent to an additional 660 children looked after compared to 2014.
- The largest reduction in the rate of children looked after was in Neath Port Talbot. There, the size of the local child population has remained fairly static whilst the number of children looked after fell from around 465 to 330. As a consequence, the local rate has fallen from 168 per 10,000 to 118 per 10,000.

Table 4: Changes in the Size of the Children Looked After Cohort, by Local Authority

	0-17 Population			LAC Cohort (Number)					LAC Cohort (Number) Compared to 2014		LAC Cohort (Rate per 10,000)					Net change in Rate
	2014	2017	% change	2014	2015(r)	2016	2017(r)	2018	Net Change	% change	2014	2015(r)	2016	2017(r)	2018	
Isle of Anglesey	13,631	13,429	-1.5	75	90	110	140	145	70	93	57	65	80	104	107	51
Gwynedd	23,668	23,410	-1.1	185	190	205	220	225	40	22	78	81	88	93	97	19
Conwy	21,726	21,499	-1.0	165	155	170	175	210	45	27	75	72	78	82	99	24
Denbighshire	19,454	19,365	-0.5	160	160	175	155	165	5	3	84	83	89	84	85	2
Flintshire	32,157	32,028	-0.4	210	220	210	210	215	5	2	66	68	65	66	68	2
Wrexham	29,356	29,240	-0.4	210	175	200	210	255	45	21	71	60	67	72	88	16
Powys	25,166	24,242	-3.7	150	135	150	155	210	60	40	59	54	60	63	87	28
Ceredigion	12,530	12,321	-1.7	75	80	80	75	60	-15	-20	61	62	63	60	50	-10
Pembrokeshire	24,674	24,198	-1.9	125	115	125	125	135	10	8	50	47	52	52	56	6
Carmarthenshire	37,073	37,096	0.1	245	240	215	205	195	-50	-20	66	64	58	56	52	-14
Swansea	46,989	47,272	0.6	535	510	510	480	520	-15	-3	114	109	108	102	110	-4
Neath Port Talbot	27,890	27,891	0.0	465	435	375	345	330	-135	-29	168	156	135	124	118	-50
Bridgend	29,048	29,217	0.6	410	390	380	390	385	-25	-6	142	135	131	134	131	-10
Vale of Glamorgan	27,035	27,244	0.8	185	185	195	225	245	60	32	68	69	72	84	90	22
Cardiff	73,143	74,155	1.4	610	650	645	720	830	220	36	84	89	88	97	112	27
Rhondda Cynon Taf	49,986	49,912	-0.1	650	620	625	690	675	25	4	130	124	125	138	135	5
Merthyr Tydfil	12,479	12,736	2.1	175	165	140	145	155	-20	-11	140	131	113	115	122	-17
Caerphilly	38,843	38,334	-1.3	275	270	275	330	385	110	40	71	70	72	85	100	30
Blaenau Gwent	13,958	13,555	-2.9	145	135	190	210	235	90	62	102	98	139	154	172	70
Torfaen	19,360	19,088	-1.4	295	290	270	315	365	70	24	152	150	142	166	191	38
Monmouthshire	18,117	17,586	-2.9	105	110	130	135	140	35	33	56	60	73	75	79	23
Newport	33,326	34,471	3.4	285	285	295	280	325	40	14	86	86	88	83	94	8
Wales	629,609	628,289	-0.2	5,745	5,615	5,665	5,945	6,405	660	11	91	89	90	95	102	11

Sources: Looked After Children Census, Stats Wales (2018d), Stats Wales (2018f) and Office for National Statistics (2018a). Notes: The most recent mid-year population estimates provided by the Office for National Statistics relate to 2017, these have been used to determine the rates per 10,000. (r) denotes that the data has been revised since previously published. The number of children looked after is rounded to the nearest 5. As a result, the rate of children looked after and net change have been reported to the nearest integer.

Table 5: Comparisons of the Number of Children Looked After, by Region Across England and Wales

	Number of Children Looked After					LAC Cohort Compared to 2014		0-17 Population		
	2014	2015	2016	2017	2018	Act. Change	% Change	2014	2017*	% change
Wales	5,745	5,615	5,665	5,955	6,405	660	11.5	629,609	628,289	-0.2
North East	4,240	4,270	4,400	4,830	5,020	780	18.4	524,984	527,411	0.5
North West	12,260	12,490	12,550	13,220	14,070	1,810	14.8	1,514,982	1,543,276	1.9
West Midlands	9,130	9,360	9,250	9,490	10,050	920	10.1	1,257,088	1,282,904	2.1
Yorkshire and The Humber	7,380	7,260	7,250	7,720	8,190	810	11.0	1,141,040	1,158,481	1.5
England	68,810	69,470	70,400	72,590	75,420	6,610	9.6	11,591,701	11,866,957	2.4
East Midlands	4,950	5,100	5,170	5,360	5,630	680	13.7	965,746	988,743	2.4
South West	5,450	5,550	5,710	5,800	6,020	570	10.5	1,076,536	1,096,477	1.9
South East	8,950	9,310	9,870	9,830	10,000	1050	11.7	1,904,420	1,943,865	2.1
East of England	6,350	6,150	6,340	6,450	6,550	200	3.1	1,286,694	1,324,441	2.9
London	10,110	9,980	9,860	9,900	9,890	-220	-2.2	1,920,211	2,001,359	4.2

Sources: Additional Tables, Children looked after in England, year ending 31 March 2018 (Department for Education, 2018), Stats Wales (2018f) and Office for National Statistics (2018b: Table 4). Notes: The most recent mid-year population estimates provided by the Office for National Statistics relate to 2017. The rates of children looked after, based on these population estimates can be found in Table 3.

- The three local authorities which have seen the greatest net increase in the rate of children looked after over the last 5 years (i.e. Blaenau Gwent, Isle of Anglesey and Torfaen) have seen increases in the size of their children looked after cohort whilst experiencing a decrease in the size of their child population.

In contrast, as can be seen from Table 5, the 0-17 population in England and each of the regions increased between 2014 and 2018. Only London saw a decrease in the size of their children looked after cohort over this period which in the context of an increase in the child population led to the rate of children looked after falling from 54 to 49 per 10,000.

Cordis Bright (2013) asserted that population size was a key factor that helped to explain some of the differences in rates of children looked after between local authorities. To demonstrate the relationship between changes in the local population size, the number of children looked after and the rate, over time, the data for 2014 to 2018 has been modelled. By 'fixing' the local authority rate at the 2014 level and allowing the local population to change as per the mid-year population estimates, it is possible to look at the impact that population change should have on the expected size of the children looked after cohort if the rate of children looked after had stayed constant. The results of this exercise are summarised in Table 6.

Table 6: Modelled Data: Assuming No Change in the Local Authority Rates between 2014 and 2018

	0-17 Population			Actual LAC Cohort 2014		Actual LAC Cohort 2018		Modelled Impact on LAC Cohort (Number)		Difference in LAC Rate (Modelled cf. Actual 2018)
	2014	2017*	% change	Number	Rate	Number	Rate	Modelled 2018 (Based on 2014 Rate)	Difference (Modelled cf. Actual 2018)	
Powys	25,166	24,242	-3.7	150	59	210	87	143	-67	28
Monmouthshire	18,117	17,586	-2.9	105	56	140	80	99	-41	23
Blaenau Gwent	13,958	13,555	-2.9	145	102	235	173	138	-97	72
Pembrokeshire	24,674	24,198	-1.9	125	50	135	56	121	-14	6
Ceredigion	12,530	12,321	-1.7	75	61	60	49	72	15	-12
Isle of Anglesey	13,631	13,429	-1.5	75	57	145	108	76	-69	51
Torfaen	19,360	19,088	-1.4	295	152	365	191	291	-74	39
Caerphilly	38,843	38,334	-1.3	275	71	385	100	271	-114	30
Gwynedd	23,668	23,410	-1.1	185	78	225	96	184	-41	18
Conwy	21,726	21,499	-1.0	165	75	210	98	161	-49	23
Denbighshire	19,454	19,365	-0.5	160	84	165	85	162	-3	2
Flintshire	32,157	32,028	-0.4	210	66	215	67	211	-4	1
Wrexham	29,356	29,240	-0.4	210	71	255	87	208	-47	16
Rhondda Cynon Taf	49,986	49,912	-0.1	650	130	267	135	649	-26	5
Neath Port Talbot	27,890	27,891	0.0	465	168	330	118	468	138	-49
Carmarthenshire	37,073	37,096	0.1	245	66	195	53	243	48	-13
Swansea	46,989	47,272	0.6	410	142	385	132	415	30	-10
Bridgend	29,048	29,217	0.6	535	114	520	110	540	20	-4
Vale of Glamorgan	27,035	27,244	0.8	185	68	245	90	185	-60	22
Cardiff	73,143	74,155	1.4	610	84	830	112	626	-204	27
Merthyr Tydfil	12,479	12,736	2.1	175	140	155	122	178	23	-18
Newport	33,326	34,471	3.4	285	86	325	94	297	-28	8
Wales	629,609	628,289	-0.2	5,745	91	6,405	102	5,727	-678	11

Sources: Looked After Children Census, Stats Wales (2018d), Stats Wales (2018f) and Office for National Statistics (2018a).

Since the published data are rounded to the nearest 5, these estimates are crude. However, it is interesting to note the difference between the actual and modelled 2018 children looked after cohort sizes at a local authority level that this would have resulted in, particularly where there have been significant changes in the underlying population. For example:

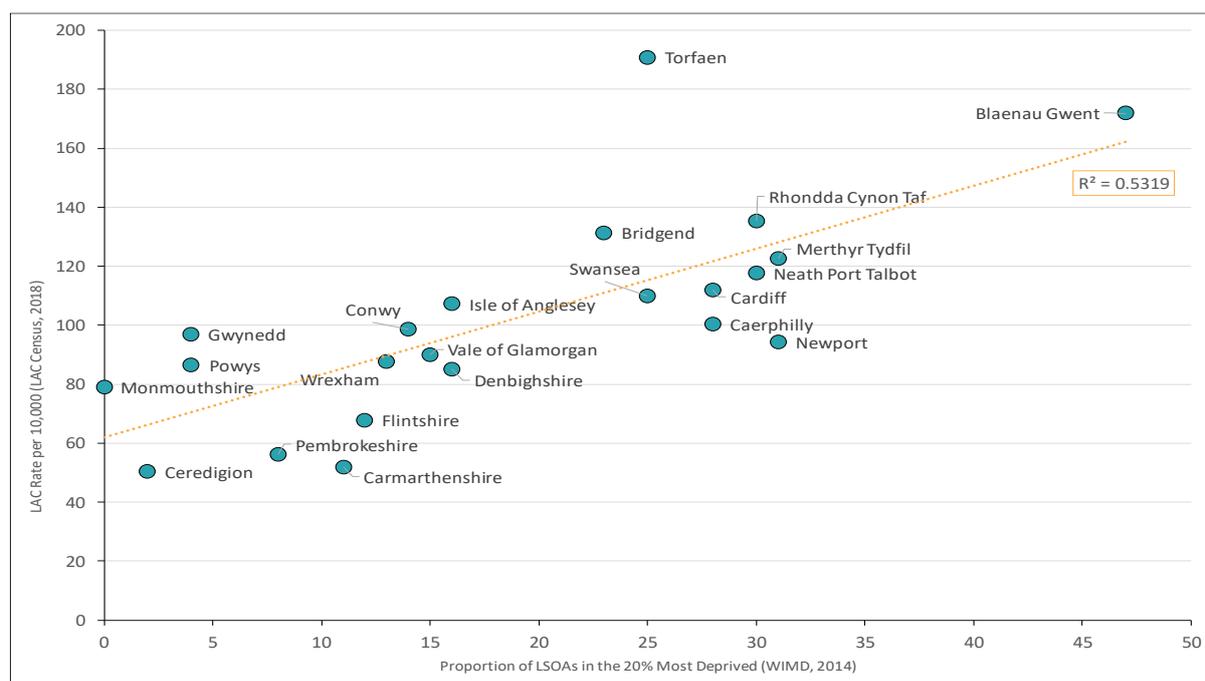
- In 2014, Newport had 86 children looked after per 10,000 of the local population. Between 2014 and 2017 (the latest population estimates available), the size of the local population increased by 3.4%. Had they been able to maintain their children looked after rate at the 2014 level, the increase in the underlying population would have meant that we would have expected to see the number of children looked after rising from around 285 to 297. Instead as at 31st March 2018, Newport had 325 children looked after - a difference of approximately 28 children.
- Powys had 150 children looked after in 2014, equivalent to a rate of 59 per 10,000. Their local population shrank between 2014 and 2017 by 3.7%. Had Powys been able to maintain its 2014 rate, rather than having 210 children looked after on 31st March 2018, we would have expected there to be 143 – approximately 67 fewer.
- As highlighted, the underlying child population remained fairly static in Neath Port Talbot between 2014 and 2017. Had their rate of children looked after been maintained at the 2014 level, the modelling suggests that they would have had 468 children looked after rather than the 330 that they had on 31st March 2018 – approximately 138 more children looked after.

Comparing local authority child population sizes and the difference between the modelled number of children looked after and the actual number on 31st March 2018 suggests that there is a very weak relationship between the two, especially if Cardiff is removed – its population is significantly bigger than that of the other local authorities and as such its inclusion has a greater impact on the overall amount of variance potentially explained.

What is the relationship between deprivation and the rate of children looked after?

The link between deprivation and levels of demand for children's services is well established (see for example Bywaters et al. (2016)), with 'research proposing a combination of direct factors (such as material hardship) and indirect factors (parental stress and neighbourhood condition) as the causal links' (Lum and Tregidgo, 2018: 15). As can be seen from Figure 9, there is a positive correlation between the rate of looked after children and the Welsh Indices of Multiple Deprivation (WIMD), with just over half of the variation explained ($R^2 = 0.53$ i.e. 53%). This supports the conclusions made by both Elliott and Scourfield (2017) and Cordis Bright (2013) about the significance of deprivation.

Figure 9: Looked After Children Rate, 2018 compared to the WIMD 2014



Notes: Looked After Children Census (Stats Wales, 2018f). The proportion of LSOAs ranked in the Top 20% most deprived is based upon WIMD 2014 (Stats Wales, 2018i).

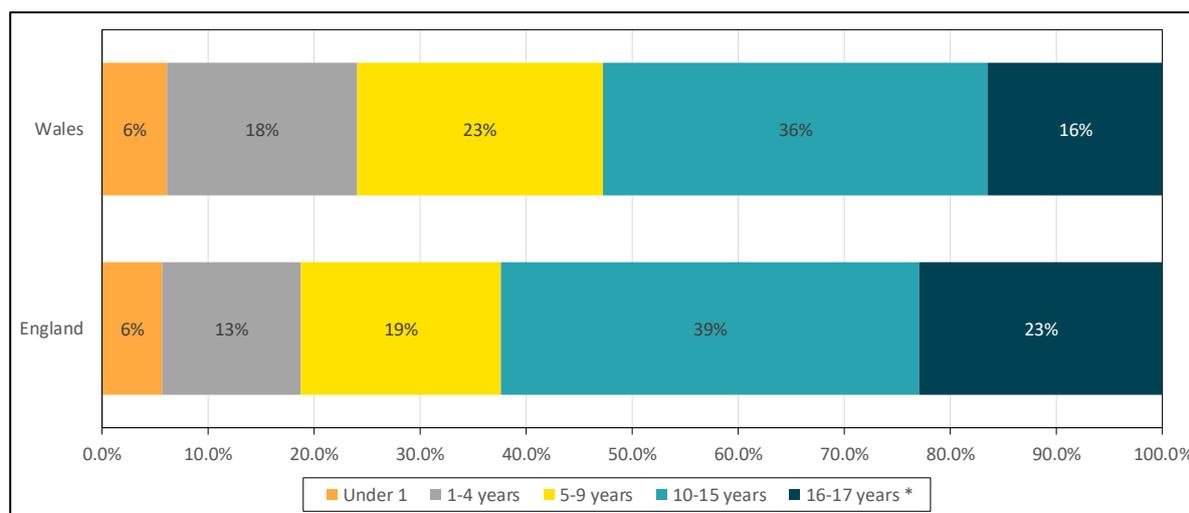
However, it is notable that Torfaen has a higher rate of looked after children than would be anticipated given the proportion of its LSOAs ranked as being in the most deprived 20% in Wales. This, and the amount of variation that remains unexplained suggest that there are other factors which contribute to the different rates across Wales.

Is there variation due to age and/or gender?

The broad characteristics of looked after children have remained similar to previous years; just over half (54%) are male, 46% are female. Taking into account the profile of the 0-17 population in Wales, this is roughly equivalent to 108 male children looked after per 10,000 compared to 96 female children per 10,000.

The largest age group of Welsh children looked after are aged 10-15 years followed by those aged 5-9 years. Approximately a quarter of children looked after are under the age of 5 - 18% are aged 1-4 years and 6% aged under 1 year. Around one in six (16%) are aged 16 or over - this includes approximately 5 individuals aged 18 who remain under the care of the local authority. This is a notably different profile to that in England where those aged 16 or over make up 23% of their children looked after cohort (Figure 10).

Figure 10: The Age Profile of Children Looked After as at 31st March 2018



Source: Looked After Children Census Stats Wales (2018f) and Additional Tables, Children looked after in England, year ending 31 March 2018 (Department for Education, 2018)

Over the last 5 years the numbers of children looked after have increased within each age group. This has occurred at different rates, prompting a shift in the age profile of the children looked after cohort. Notably the number of children looked after aged 10 to 15 has increased by 18% (from 2,025 to 2,380) whereas the number aged 16 to 17 has increased by only 3% (from 975 to 1,000). Calculating indicative rates of children looked after by age group to take into account the structure of the underlying population highlights the growth in the rate of 10 to 15 year olds looked after compared to 31st March 2017.

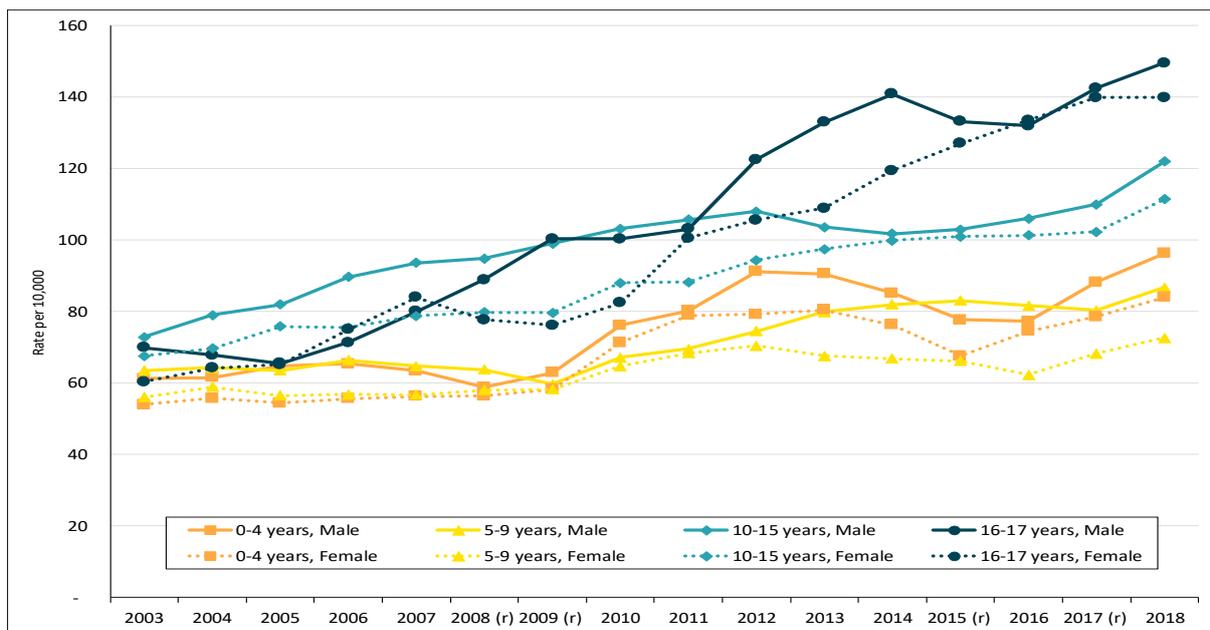
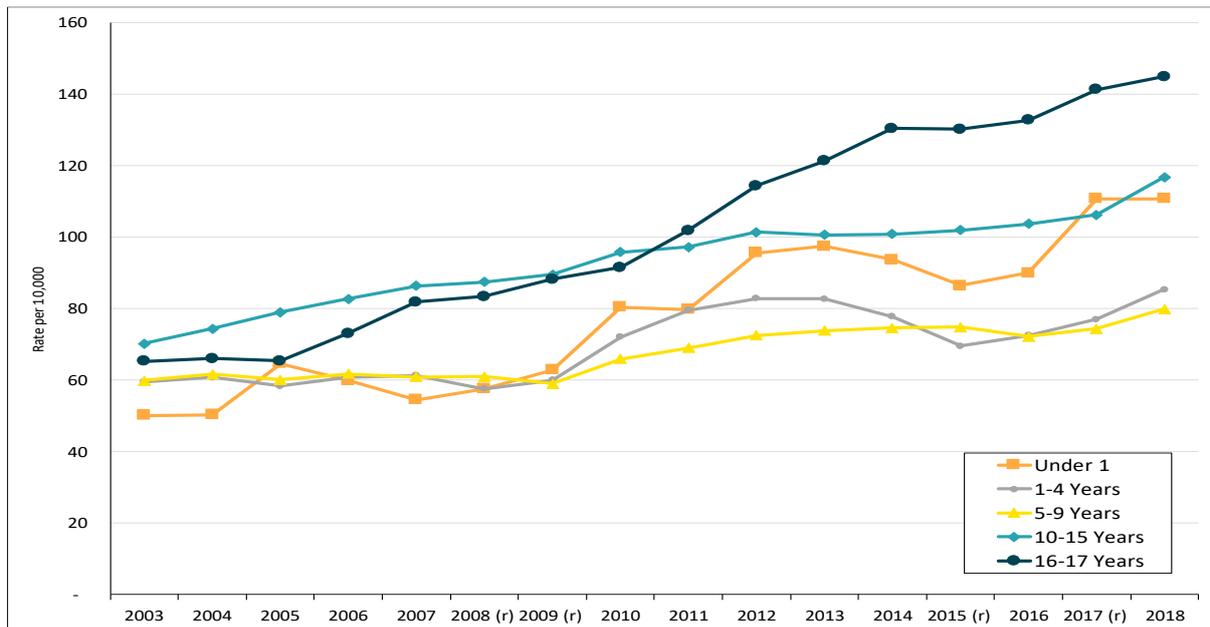
Longer term trends are shown in Figures 11(a) and (b). Whilst these show that the rate of children looked after in each age group has increased since 2003, the rate of 10-15 year looked after was overtaken by the rate of 16-17 year olds for the first time in 2011. It is likely that some of the increased rate for this older group can be explained by the cumulative effect of higher numbers entering the care system at a younger age and continuing to be looked after as a teenager.

Table 7: Children Looked After by Age Group

	Number of Children Looked After					Indicative Rate per 10,000				
	2014	2015	2016	2017	2018	2014	2015	2016	2017	2018
Under 1	315	290	300	360	360	94	86	90	111	111
1 to 4 years	1,120	990	1,015	1,065	1,180	78	70	73	77	85
5 to 9 years	1,315	1,345	1,320	1,375	1,475	75	75	72	74	80
10 to 15 years	2,025	2,035	2,085	2,165	2,380	101	102	104	106	117
16 to 17 years	975	945	940	975	1,000	130	130	133	141	145
Total exc 18 year olds	5,750	5,605	5,660	5,940	6,395	91	89	90	95	102

Source: Mid-year population estimates by age for each local authority, 2001 to 2017 (Office for National Statistics, 2018a) and Children looked after at 31 March by local authority, gender and age (Stats Wales, 2018d).

Figure 11: Indicative Rates of Children Looked After by (a) Age Group and (b) Age and Gender



Source: Mid-year population estimates by age for each local authority, 2001 to 2017 (Office for National Statistics, 2018a) and Children looked after at 31 March by local authority, gender and age (Stats Wales, 2018d).

It is worth noting that England particularly saw a large increase in the number of unaccompanied asylum-seeking children in the year ending 31 March 2016 (Department for Education, 2018). This sub group are generally older (aged 16 years +), boys, and are in need due to absent parenting. Equivalent figures for Wales are not in the public domain¹²

¹² These figures have been requested from the Welsh Government as an update to an existing FOI request appearing on Stats Wales based on data from the LAC Census. The low numbers mean that it was not possible to provide a local authority breakdown of the data. Data has recently been released based on the CRCS Census

although nationally the number of unaccompanied asylum-seeking children has increased from around 40 on 31st March 2016 to approximately 70 on 31st March 2018. Given the small numbers involved, it is not possible to determine whether or not these children concentrated in the four Welsh local authorities which are dispersal areas for asylum seekers: Cardiff, Wrexham, Newport and Swansea. If they are, then there is the potential that this sub-group may be impacting on local authority level rates. In order to establish whether or not this could be a local explanatory factor, it would be necessary to analyse the individual level data from the LAC Census, ideally over the course of the year rather than relying upon snapshot data.¹³

In addition to the cumulative effect of those having entered at a younger age and continuing to be looked after, other factors which may be contributing to the increases in the rates of older children looked after include:

- ‘County Lines’¹⁴ – the recent phenomenon whereby organised crime groups use young people and vulnerable adults to deliver their drugs, coercing them with payments or gifts, or by forcing them through intimidation or violence. Factors that heighten a person’s vulnerability to being targeted include: having prior experience of neglect, physical or sexual abuse; lack of a safe/stable home environment; homelessness or insecure accommodation status; having a physical or learning disability; having substance misuse or mental health issues; and being a child looked after, particularly in residential care (South Wales Police, no date). Wales, and North Wales in particular, have been particularly hard hit by this issue (BBC, 2018)
- The 2009 Southwark ruling which places an onus on local authorities to accommodate 16-17 year olds who present as homeless. The 2014 Act clarifies the role of local authorities in their duty to provide accommodation for those aged 16 and 17 who cannot safely live at home. Where a 16-17 year old requests accommodation under section 76, the parents are unable to require the child’s return.

suggesting that as at 31st March 2018 there were 60 unaccompanied asylum seeking children and 45 children within families who had sought asylum who were being looked after Stats Wales. (2019b) *Children receiving care and support by asylum seeker status, gender and looked after status*. Retrieved from: <https://statswales.gov.wales/Catalogue/Health-and-Social-Care/Social-Services/Childrens-Services/children-receiving-care-and-support/childrenreceivingcareandsupport-by-asylumseekerstatus-gender-lookedafterstatus..>

¹³ Analysis undertaken by Elliott and Scourfield (2017) using individual level data found that rates increase as age increases across all deprivation levels. They note that this is contrary to the trends observed by Elliott M. (2017) and other studies which show higher rates of younger children particularly those under 4 years. This is attributed to the use of snapshot data rather than longitudinal data.

¹⁴ ‘County Lines’ is an issue affecting many areas of the UK involving the use of mobile phone ‘lines’ by groups to extend their drug dealing business into new locations outside of their home areas. A ‘county lines’ enterprise almost always involves exploitation of vulnerable persons; this can involve both children and adults who require safeguarding. Children as young as 12 years old can be targeted and recruited to travel between the urban home county and more rural locations to deliver drugs and collect cash on behalf of the dealers. ‘Runners’ sometimes go to extreme lengths to avoid the police finding the drugs on them.

The age profile of children looked after appears to also have implications for placement, with Elliott and Scourfield (2017) identifying that 16-17 year olds are more likely to be placed in non-kinship care. Notably links are also made with the level of deprivation, with the rates of 16-17 year olds looked after not placed with parents, relatives or friends decreasing as the level of deprivation increases. This link to deprivation is also apparent for other age groups, with higher proportions of children in each age group being placed with family or friends in more deprived areas (McCartan et al., 2018). It is not possible to explore this further using the published data. However, it is also worth noting that based on analysis of 6-years' worth of data, Elliott (2017) identified that children aged 0-4 years coming into care from the 20% most deprived LSOAs are 10 times more likely to do so than children in the same age group living in the least deprived 20% of LSOAs, but many of these are looked after only for brief periods. In contrast, the social gradient present in the data for 16-17 year olds is considerably less steep with the variation in rates between the most and least deprived quintiles being four-fold.

More generally, the availability of potential adoptive parents may also be contributing to the increases in both the number and rate of children looked after in recent years, with the National Adoption Service seeing a 28% reduction in the number of prospective adopters approved in 2017-18 relative to 2014-15 (National Adoption Service, 2018a). The challenge of recruiting sufficient adopters is having a knock-on effect on the numbers of children looked after. Whilst it is encouraging that enquiries from adopters have increased in recent years, placing children with complex needs, particularly those with significant health needs, older children and sibling groups typically takes longer and can be more problematic (National Adoption Service, 2018b).

Increasing awareness of domestic abuse, and more recently child sexual exploitation, modern slavery and human trafficking also have significant safeguarding implications. The resulting increase in practitioner awareness has resulted in a shift in the referral sources, with the police and primary/community health now playing a greater role in identifying children at harm or at risk of harm. This trend is apparent in the data from the Children in Need Census. However, referral source for the most recent episode of care is not published as part of the CRCS dataset on Stats Wales.

What can be established about the role of ethnicity?

Cordis Bright (2013) were unable to attribute variation in the local authority children looked after rates to the proportion of the local population from BAME groups. However, based on their analysis of individual level data, Elliott and Scourfield (2017) were able to identify that the overall rates of mixed background children in care on 31st March 2015 were higher than those for the other ethnic categories. Black children were represented at higher rates than White children, with the highest rate of Black children in care coming not from the most deprived neighbourhood as would be expected, but from the middle quintile. Black children also enter care at a higher rate from the least deprived quintile than they did from the most deprived, which is the reverse of all the other ethnic categories used. Asian children are consistently less likely to be in care than children in the other ethnic categories across all levels of deprivation.

The high levels of suppression within the published aggregate data make it difficult to draw robust conclusions about the links between ethnicity and variation in the local rates of children looked after within Wales. Similarly, it is necessary to caveat the findings in relation to deprivation since WIMD lacks specificity at an individual/household level. It may well be that given the small Black population in Wales living outside deprived areas, the calculation of rates will be disproportionately affected by small changes in number.

What can be established about the role of child disability and mental ill-health?

Some children may receive care and support as a result of disability and as such their care and support plan may include provisions for respite breaks. These children are a special group, with only those whose short breaks are provided under Part 6, section 76 of the 2014 Act becoming looked after. As at 31st March 2018, 165 of the 235 who were receiving respite care were identified as disabled. Whilst data about this special group is captured as part of the LAC Census, those on short term respite placements are excluded from the published figures about the children looked after cohort.

Information about the disability status of those receiving care and support is available from the CRCS Census. This suggests that overall 21% of children receiving care and support have a physical or mental impairment where the impairment has a substantial and long-term effect on their ability to carry out normal day-to-day activities (Stats Wales, 2019e). However, the proportion of children looked after who are disabled is only 10% whilst those on the child protection register is just 4%.

Those identified as being disabled can potentially have multiple impairments and hence a complex combination of needs. These will be outlined in the child's care and support plan with assistance being provided from a range of different services.

The categories of impairment recorded for those 595 children looked after who meet this criteria are:

- Perception of the risk of physical danger (22%)
- Memory or the ability to concentrate, learn or understand (21%)
- Speech, hearing or eye sight (30%)
- Physical coordination (25%)
- Continence (13%)
- Mobility (48%)
- Manual dexterity (54%)
- Ability to lift, carry or move everyday objects (65%)

Additionally, around 240 (4%) children looked after have an autistic spectrum disorder – a lower proportion than across the wider children receiving care and support cohort (11%) (Stats Wales, 2019f).

Around one in seven (14%, 470) children looked after aged 10 or over was identified as having a current mental health problem which had been diagnosed by a medical practitioner with the child receiving Child and Adolescent Mental Health Services (CAMHS) or being on the waiting list for services. One in eleven (9%, 295) were identified as having a current substance misuse problem (Stats Wales, 2019f). As data is collected about the presence of the problem on the day of the snapshot, this is not an indication of whether it was a contributory factor in the decision to take the child into care.

Based on data about the primary category of need, as at 31st March 2018 disabled children accounted for roughly one in six children were receiving care and support (17%, 2,730 out of 16,080). Of these, 2,445 (90%) were reflected as having a disability. The majority of those receiving care and support due to the child's disability or illness were not benefiting from more intensive services. However, 6% were looked after (165 out of 2,730) with just over 1% (35 out of 2,730) being on the Child Protection Register as at 31st March 2018. The extent to which the child's illness or disability was an additional factor is not known.

As with ethnicity, the comparatively low numbers limit the amount of analysis that can be undertaken to explore the amount of variation between authorities. However, it must be acknowledged that the complexity of the individual child's needs will impact on the type of placement and the amount of resources that need to be committed to provide appropriate care and support.

Key Findings: Features of the Population

In comparison to England, Wales and its constituent regions have higher rates of children looked after, with the gap widening between the two countries. This is occurring at a time when the child population in Wales is declining, whilst in England it is increasing. **Although population change contributes to differences at a local level, it does not explain the extent of the gap at a national level or between local authorities.**

There are clear links between deprivation and the local rates of children looked after. Despite the different approach used within this report (i.e. analysis based on snapshot aggregate data rather than individual level in-year figures), it would appear that **there is a strong correlation between rates and the proportion of LSOAs in the local authority within the 20% most deprived in Wales. This accounts for around half the variation ($R^2 = 0.53$ i.e. 53%).** A key limitation of using this measure of deprivation is that it tells us little about the circumstances in which the child was living prior to their current episode of care. For example, we do not know the income level, employment status, housing circumstances or educational background of the children's parent(s) or carer.

What is apparent from the wider literature is that there are a number of factors which may have a bearing on the duration that a child might be looked after, their legal status and the type of placement. These include their age/ gender; the nature and complexity of their development, physical or mental health needs; the circumstances which led to them being looked after and the amount of support required from children's services to respond to individual needs. Since these issues can impact differently on different groups and can also impact on children's likelihood of successful permanency arrangements being secured, longitudinal analysis such as that undertaken by Martin Elliott as part of his PhD is advocated.

Policy and Practice

Can the difference in local rates within Wales be explained by variation in the respective safeguarding policies?

The work of the Child Welfare Inequalities Project has focused on detailing and understanding patterns of inequality in child welfare intervention rates across the four countries of the UK, focusing specifically on those children looked after or subject to child protection interventions. Bywaters et al. (2018) highlight that on the supply side,

'the balance of emphasis within policy and service provision between family and community support, CP [child protection] investigation and substantiation, out-of-home care, kinship care, guardianship and adoption vary substantially between the four countries.'

Within countries 'there are also substantial variations in policy or practice between local authorities operating in the same jurisdiction' (Bywaters et al., 2018). This, they speculate, may be partly linked to expenditure relative to demand, and hence potentially reflective of patterns of deprivation. However, there is recognition that other factors such as the priorities, approaches and cultures of local services must also contribute to the variation. Qualitative work would be required to unpick the nuances of these differences within Wales. However, to get a sense of the contribution that these factors make in explaining the variation in children looked after rates across the local authorities, the respective proportion of children in the 'safeguarding cohort' (i.e. either on the child protection register or looked after) has been considered relative to the wider cohort of children receiving care and support.

Across Wales almost a quarter of those receiving care and support on 31st March 2018 were looked after (6,100¹⁵, 37.9%) whilst 2,385 (14.8%) were on the child protection register but not looked after. The remaining 7,600 (out of 16,080) were not looked after or on the child protection register (47.3%). Overall, this is equivalent to a rate of 255 per 10,000 under 18 with the rate ranging between 140 children receiving care and support in Pembrokeshire to 445 in Merthyr Tydfil.

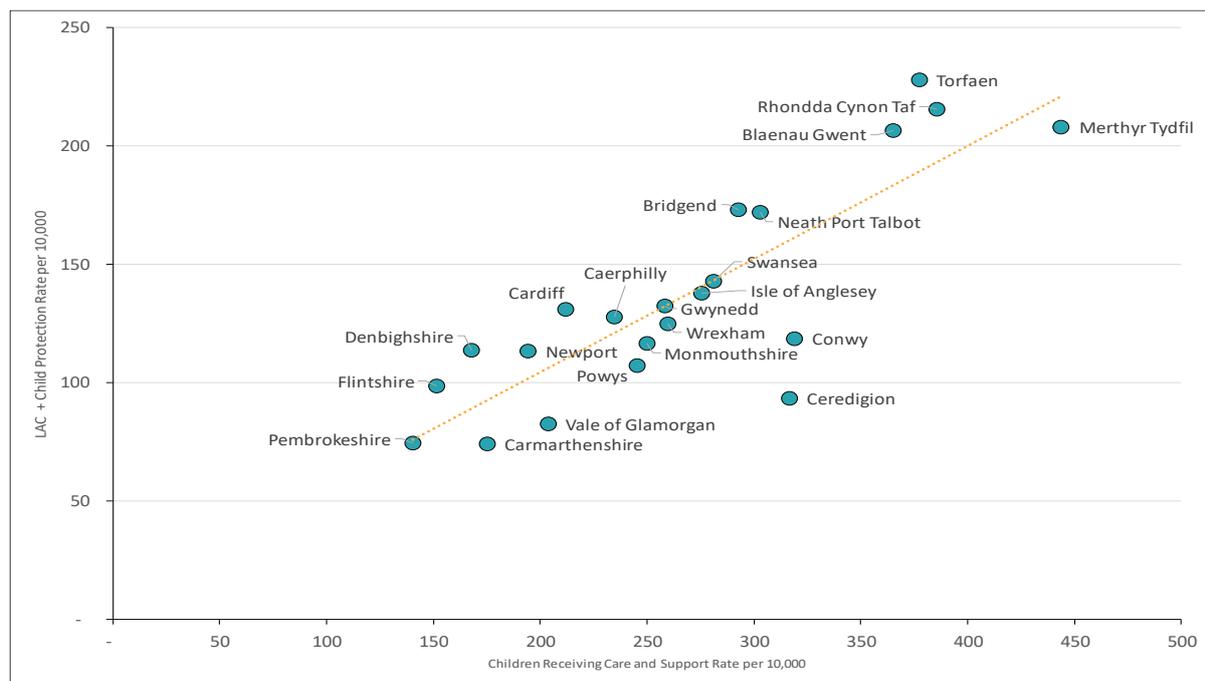
On the basis of the CRCS Census¹⁶ the rate of children looked after was 97 per 10,000 (compared to 102 per 10,000 in the same year based on the LAC Census) with a further 38

¹⁵ This includes 140 children in the CRCS Census who were looked after and on the child protection register. A breakdown of these figures is not provided on Stats Wales.

¹⁶ Changes in the legislation in Wales mean that data is now available about all those who have a care and support plan as part of the Children Receiving Care and Support (CRCS) Census. This includes those looked after or on the child protection register whose case had been open for 3 months or more on the census date of

per 10,000 having unresolved child protection issues and being subject to an inter-agency protection plan. When the two groups are combined, these represent a 'safeguarding cohort' which at 31st March 2018 comprised of 8,485 children, equivalent to 135 per 10,000. Broadly speaking those with higher rates of children receiving care and support also have higher safeguarding rates (Figure 12).

Figure 12: Comparisons Between the Combined Children Looked After and/or Child Protection Rate with that for All Children Receiving Care and Support, by Local Authority, 2018



Source: Children Receiving Care and Support Census (Stats Wales, 2019d)

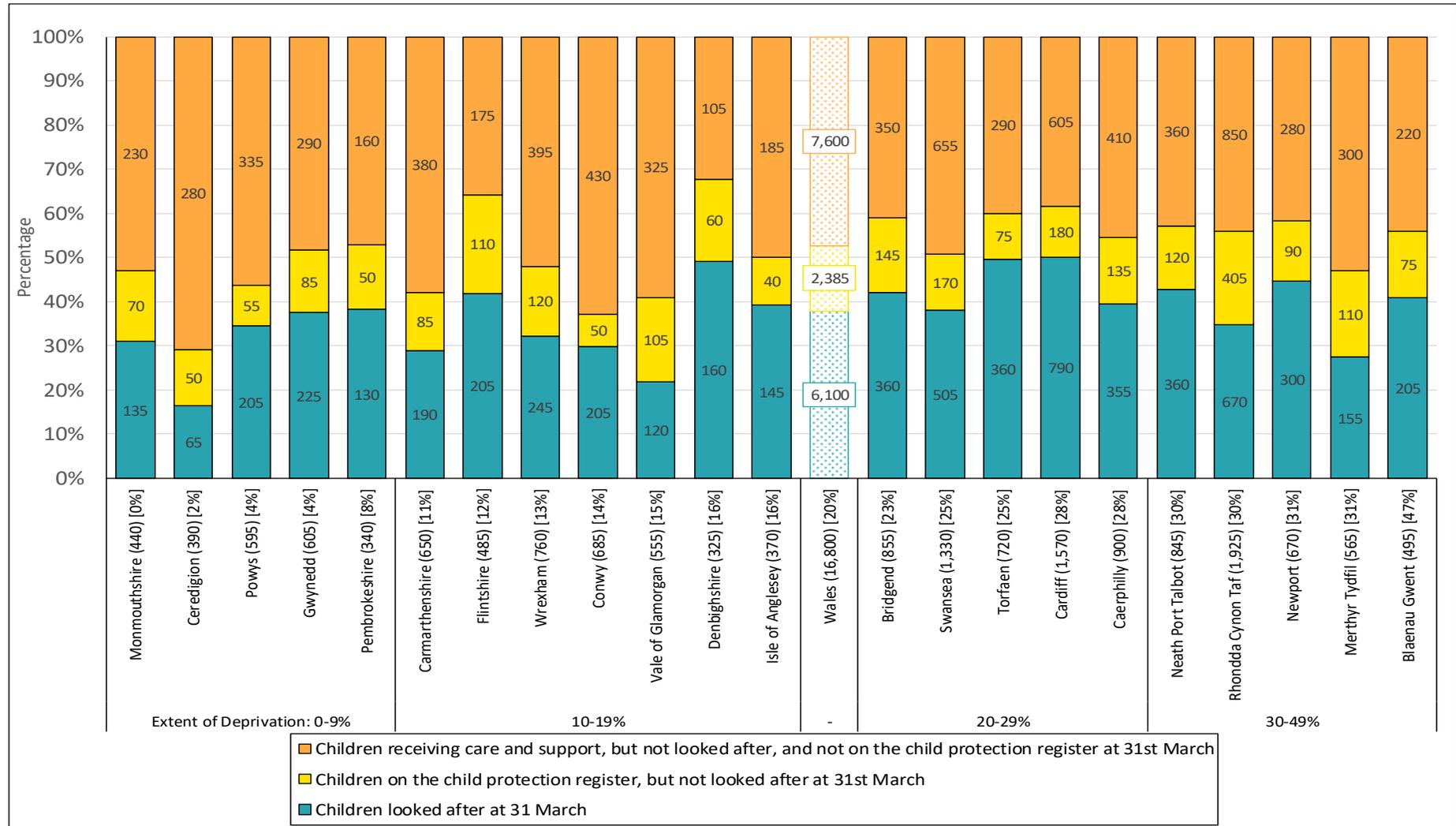
Torfaen has previously been identified as having the highest rate of children looked after and this continues to be the case based on the CRCS Census. However, its child protection register rate (39 per 10,000) is only slightly higher than the Welsh average, resulting in a combined 'safeguarding' cohort rate of 228 per 10,000. Based on the trend across the 22 local authorities, their rate of children receiving care and support is lower than would be expected. Conversely the respective rates of children receiving care and support in Conwy and Ceredigion are higher than would be anticipated given their comparatively low 'safeguarding' rate. This suggests that they have a higher proportion of those with care and support plans who are neither looked after nor on the child protection register.

31st March. At the time of writing, only one-years' worth of data is available. However, data for 31st March 2018 is anticipated to be published in late February 2019.

As can be seen from Figure 13, there is considerable variation across the local authorities in terms of the proportions within the receiving care and support cohort who are in the respective elements of the safeguarding cohort. Notably in Denbighshire, Torfaen and Cardiff around half of those with a care and support plan were looked after compared to less than one in six in Ceredigion. There is also variation in the respective proportions on the child protection register – ranging from 23% in Flintshire to just 7% in Conwy. By ordering the local authorities on the basis of the proportion of their LSOAs in the top 20% most deprived, it is possible to compare the profile by child status in areas with similar levels of deprivation. This suggests quite different profiles even amongst those with similar levels of deprivation. For example,

- When compared to Carmarthenshire which has 11% of its LSOAs in the top 20% most deprived, and Wrexham (13%), Flintshire (12%) has a notably different profile with 65% of those receiving care and support either on child protection register or in care and hence getting more intensive support. In contrast the proportions in Carmarthenshire and Wrexham were 42% and 48% respectively.
- Both Denbighshire and Isle of Anglesey have the same proportion of their LSOAs in the top 20% most deprived (16%). However, there is a marked difference in the proportion in their respective safeguarding cohorts – 68% of Denbighshire’s children receiving care and support are either looked after or on the child protection register compared to 50% of Isle of Anglesey’s.
- Blaenau Gwent has almost half (47%) of its LSOAs in the top 20% most deprived, suggesting that it has the highest extent of deprivation within Wales. Its safeguarding profile is not that dissimilar to Neath Port Talbot where 30% of the LSOAs fall into this category.

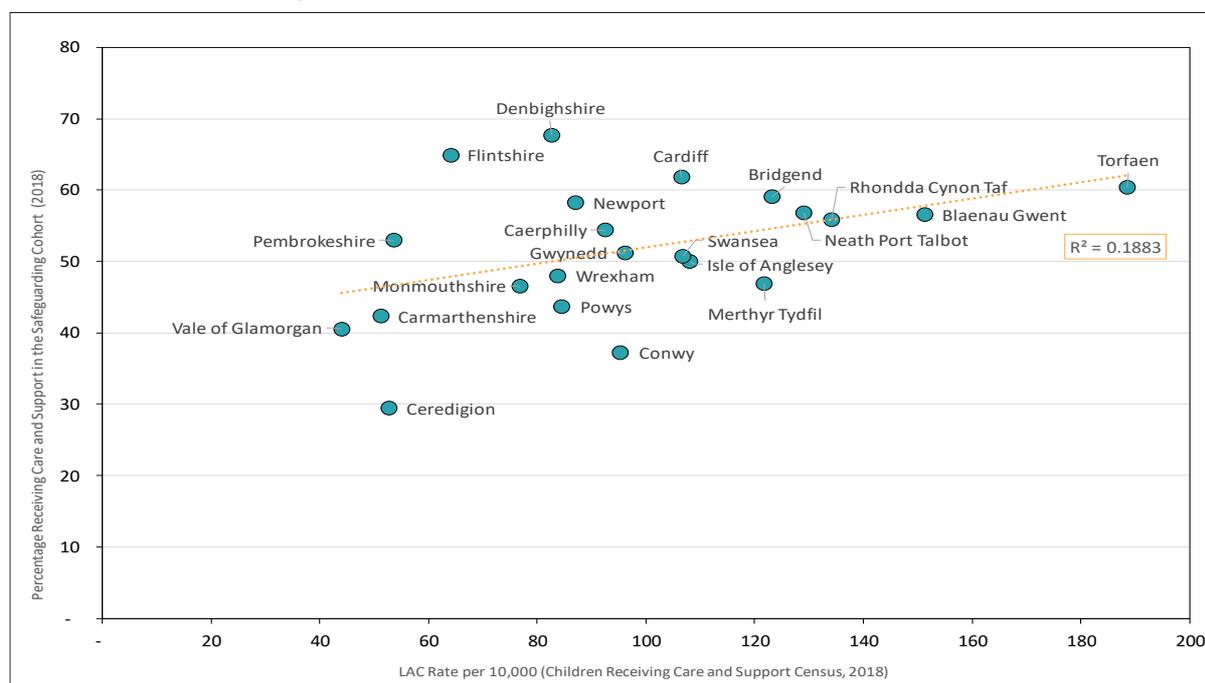
Figure 13: Local Authority Profiles of Children Receiving Care and Support by Child Status, 2018



Source: Children Receiving Care and Support Census (Stats Wales, 2019d). Local authorities have been ordered by the proportion of their LSOAs that fall into the top 20% most deprived in Wales, with the percentage given in square brackets alongside the local authority name. The data labels relate to the reported number within each element of the cohort, whilst the figure in brackets alongside the local authority name gives the total size of the children receiving care and support cohort in that area.

Comparing the rate of children looked after to the proportion within the wider children receiving care and support cohort who are either in care or on child protection registers (Figure 14), suggests a positive relationship between the proportion of the children receiving care and support who are receiving more intensive support and the rate of children looked after, with those with higher rates typically having higher proportions in the safeguarding cohort. From the analysis, it suggests that 19% ($R^2 = 0.19$) of the variation in the local authority rates of children looked after can be explained by the proportion of the children receiving care and support who are in the cohort receiving more intensive support.

Figure 14: Comparisons Between the Proportion in the Safeguarding Cohort and Local Authority Rates of Children Looked After, 2018



Source: Children Receiving Care and Support Census (Stats Wales, 2019d) where the child status is recorded as (1) looked after on 31st March and (2) on the child protection register, but not looked after at 31st March. Note that the rate of children looked after per 10,000 differs from that derived from the LAC Census due to the differences in the inclusion criteria. The rate has been calculated using the 2017 Mid-year population estimates for the child population (Office for National Statistics, 2018a).

This finding supports the assertion by Bywaters et al. (2018) that factors other than deprivation such as priorities, approaches and cultures of local services also contribute to the variations in local authority rates of children looked after. It is not possible to model the interaction between deprivation and this ‘safeguarding’ factor due to the small number of local authorities in Wales. However, the fact that both calculations of the amount of variance explained in the local authority rates have a significant proportion that cannot be accounted for by the model is indicative of there being other factors at play.

How does the legal status of the child compare?

As highlighted in the opening section, when looking to draw comparisons between the four UK nations, there are increasingly differences in approach and terminology. Notably Scotland has an entirely separate legal system to that in England and Wales, with Children's Hearings at the heart of practice. Structurally Northern Ireland is also quite different, with children's services being managed through joint Health and Social Care Trusts rather than local authorities. Whilst England and Wales have the most in common, the political and policy distinctiveness of these and the other UK nations is becoming more apparent.

Children looked after can have different legal statuses:

- **Single Periods of Voluntary Accommodation** (Under Section 76 of the 2014 Act, previously Section 20 of the 1989 Act) whereby the parents retain all their legal rights and can require the child's return at any time.
- The local authority can apply to the family court for a **care order**. Under this responsibility is shared between the parents and the local authority. However, the local authority has the overall say. Interim care orders can also be applied for which last 28 days and can be renewed, these are typically put in place whilst proceedings are taking place.
- Youth Justice related orders including where the child is under a criminal law supervision order with a residence requirement, where they are **remanded** to youth detention accommodation (such children are treated as looked after in accordance with section 104 of the Legal Aid, Sentencing and Punishment of Offenders (LASPOA) Act 2012¹⁷ or **detained** in local authority care under the Police and Criminal Evidence (PACE) Act 1984 for more than 24 hours.
- **Other statuses** include where a child is on a placement order, in preparation for being adopted and where they are placed on child protection grounds in local authority accommodation. This category could also include children placed under police protection (max 72 hours); under an emergency protection order (initially for 8 days, but can be extended by a further 7 days) or a child assessment order. In the case of the latter, the child is only looked after if he/she is taken into LA accommodation for the purpose of carrying out the assessment.

It is important to note that those on Special Guardianship Orders (SGOs), like adoption, are not counted in statistics for children looked after. These orders provide greater security of care for children who had been looked after either with pre-existing foster carers or with relatives or friends. Bywaters et al. (2018) highlight that SGOs are not available in Scotland and Northern Ireland. In England and Wales, it is not clear how many children may currently

¹⁷ Children detained under Sections 90 to 92 of the Powers of the Criminal Courts (Sentencing) Act 2000 are not considered to be looked after even if they are placed in local authority accommodation except when under a concurrent care order. These children will have to be sentenced to longer sentences for serious offences.

be living in alternative families having been placed by the state through permanency provision such adoption or SGOs, having previous been looked after¹⁸.

On 31st March 2018, four out of every five (80%) looked after children in Wales was on a care order. This is where an application has been made by a local authority or authorised person to the court to:

- (a) place a child with respect to whom the application is made in the care of a designated local authority; or
- (b) put him/her under the supervision of a designated local authority.

Section 31 Children Act 1989 sets out the 'threshold criteria' for a care order. The same requirements apply to making a supervision order. A court may only make a care order or supervision order if it is satisfied –

- (a) that the child concerned is suffering, or is likely to suffer, significant harm; and
- (b) that the harm, or likelihood of harm, is attributable to —
 - (i) the care given to the child, or likely to be given to him/her if the order were not made, not being what it would be reasonable to expect a parent to give to him/her; or
 - (ii) the child's being beyond parental control.

The burden of proof is on the local authority to establish that these criteria are met, namely:

- the child was suffering significant harm, or was likely to, at the date the local authority intervened
- the harm or likelihood of harm is attributable to the child's parent(s).

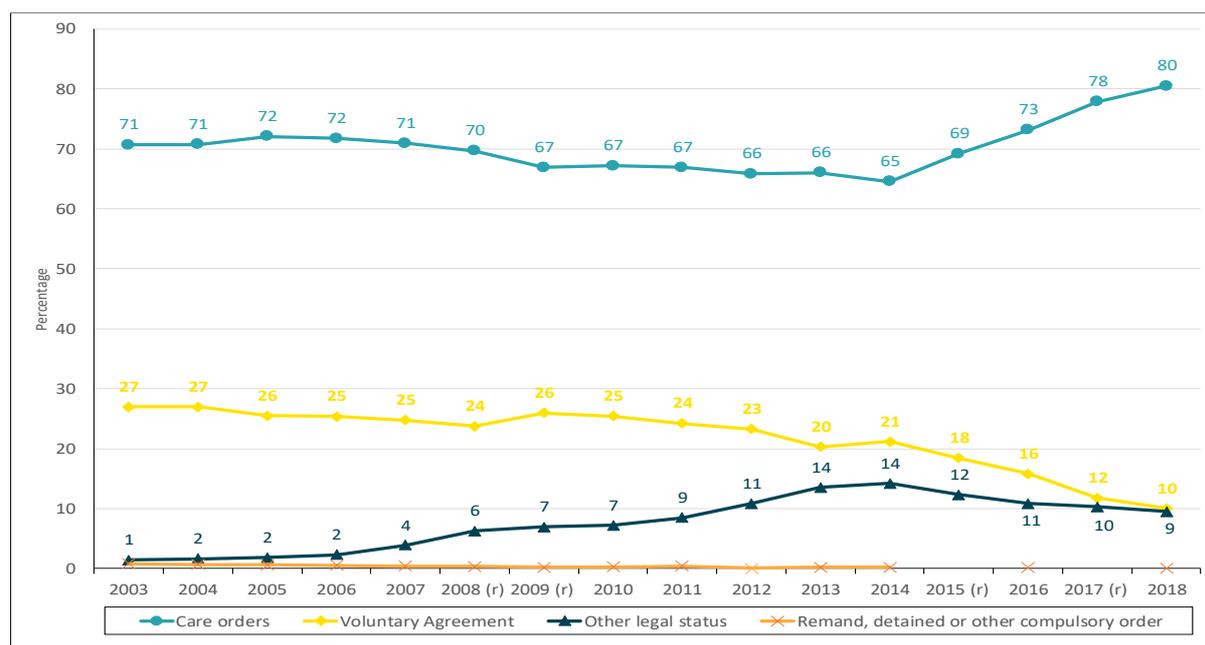
If the threshold criteria are established, the court may then make a care (or supervision) order if this is in the child's welfare.

The proportion on care orders as at 31st March has been increasing since 2014 while the respective proportions looked after under voluntary agreements or other legal statuses has fallen (Figure 15). Over the last 5 years the actual number of Welsh looked after children on care orders has increased by 39% from 3,710 to 5,155 (Figure 16). Whilst care orders

¹⁸ Over the last 10 years in Wales, 4,860 children have ceased to be looked after because they were adopted for discharged to SGOs. Whilst, post order disruption rates for both types of legal orders are low (Bilson A and Munro EH. (2019) Adoption and child protection trends for children aged under five in England: Increasing investigations and hidden separation of children from their parents. *Children and Youth Services Review* 96: 204-211., what is not clear is how many of these were still aged under 18 on 31st March (Bilson A. (2017) *The Government's Adoption Drive isn't Achieving Its Aims*. Retrieved from: <https://www.communitycare.co.uk/2017/02/09/the-governments-adoption-drive-isnt-doing-what-it-set-out-to-do/>..

represent a slightly lower proportion of legal statuses of children looked after in England (73%), this has also been increasing – from 40,090 in 2014 to 55,240 in 2018, equivalent to an increase of 38%. At a local authority level in both countries there is significant variation in the proportion on care orders suggesting that there is the potential that the ‘threshold criteria’ is differently interpreted and/or that at a designated family court level there are different expectations around whether the burden of proof has been established.

Figure 15: The Proportion of Looked After Children by Legal Status



Source: Children looked after at 31 March by local authority and legal status (Stats Wales, 2018b)

During the same period, those accommodated under a voluntary agreement for a single period¹⁹ almost halved – from 1,215 in 2014 to 640 in 2018 (a decrease of 47%). Children looked after under this type of agreement now represent just one in ten of those looked after in Wales as at 31st March. The proportion in England is higher at 19% although there has also been a decrease in the numbers within the cohort who are voluntarily accommodated over the last 5 years (from 18,720 to 14,500).

¹⁹ The provisions which previously fell under section 20 of the 1989 Act have been restated under Section 76 of the 2014 Act with respect to voluntary agreements. These enable a local authority to provide accommodation for any child in need if they consider that to do so would safeguard or promote the child’s welfare. Such an arrangement requires the consent of those with parental responsibility where a child is under 16 or the child themselves where the child is over 16.

A local authority is required to provide accommodation for a child within their area under Section 76 as a result of:

- (a) there being no person who has parental responsibility for him/her;
- (b) his/her being lost or having been abandoned; or
- (c) the person who has been caring for him/her being prevented (whether or not permanently, and for whatever reason) from providing him/her with suitable accommodation or care.

Stevenson (2017) attributes the fall in the numbers being voluntarily accommodated, to major interventions made by judges in practice. Following two key cases²⁰, Sir James Munby president of the Family Division, set out clear guidelines about how social workers and local authorities should approach both these and special guardianship cases. As a result, there is now greater scrutiny of the use of section 20 - section 76 in Wales - cases to avoid the 'misuse and abuse' of such arrangements, notably as preludes to care proceedings. This has prompted local authorities to re-examine cases and bring some to court as care proceedings. Judicial concern had also been expressed over local authorities recommending adoption despite recurrent 'inadequacy' in their analysis whilst there has been a government review which led to regulation changes intended to try to better safeguard children and families going through the SGO process.

Within Wales, generally those local authorities with a higher rate of children looked after appear to have lower proportions of the cohort looked after as a single period of voluntary accommodation on 31st March 2018. However, there does not appear to be a correlation between the respective proportions of children looked after who are on care orders and the local authority rate. It is difficult however, to determine if this explains differences in the rates between Wales and England as this only reflects a snapshot and not the trend over the course of the year. Without published information about the duration for which the child is looked after²¹, it is similarly not possible to establish whether this also accounts for some of the variation - Certainly the differences in the rates from the LAC Census and the CRCS Census suggest that there may be more children looked after for short periods (and hence

²⁰ In *Re N*, Munby attacked the "misuse and abuse" of section 20 arrangements suggesting that many local authorities had been using it inappropriately as an alternative to care orders, rather than for voluntary short-term periods with a clear purpose when a family need planned support. New guidance around what represents good practice was therefore issued. In *Re B-S*, Munby outlined how practitioners should use the balance-sheet approach when considering care proceedings.

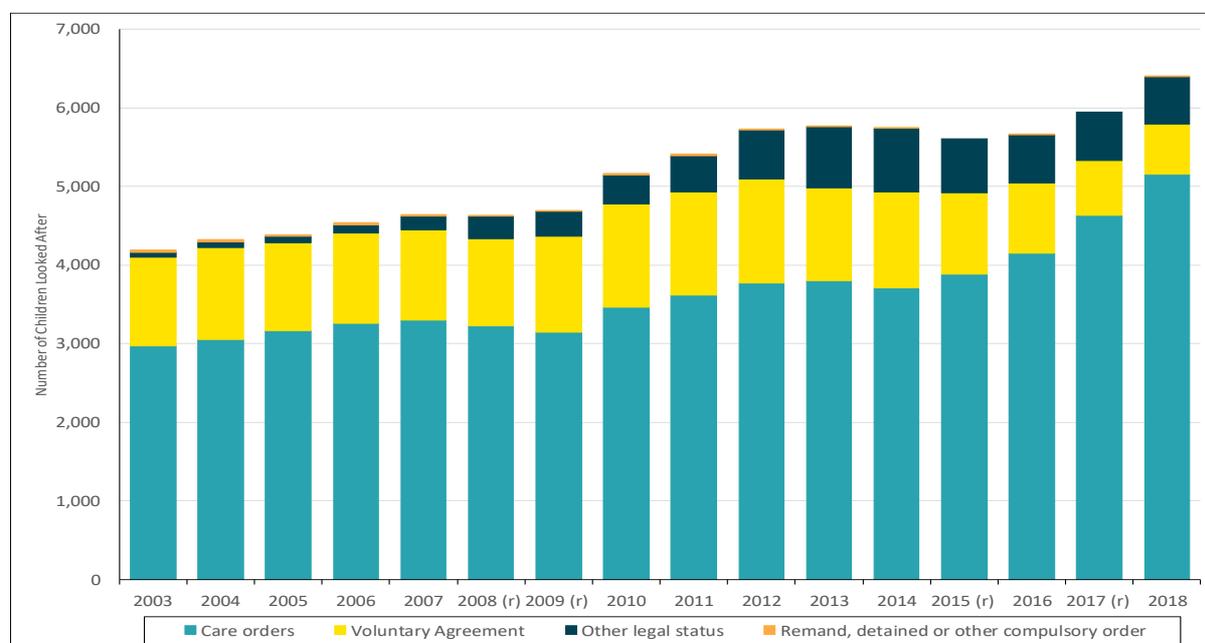
²¹ Elliot, M (2017) includes some information about the duration that children are looked after for including where there has been re-entry into care. This has been determined by looking at 6 years' worth of individual level data.

not meeting the inclusion criterion for the CRCS Census) in some local authorities than others.

Very few children within Wales are looked after as a result of being on remand, detained or other compulsory order – indeed only a handful of children were recorded as having this as their legal status as at 31st March 2018. In England those with a youth justice legal status represented less than 0.5% of the cohort.

The numbers with other legal status had been rising. However, between 31st March 2014 and 31st March 2018, the numbers have fallen by 26% - equivalent to 210 fewer children. Other legal status includes those on placement orders / freeing orders²². Just under one in ten children looked after in Wales (9%) fall into this group. The 26% decrease in those with other legal status over the last 5 years is, in part, linked to difficulties in attracting suitable families willing to adopt. Analysis of the annual reasons for episodes ceasing suggests that the numbers leaving care due to adoption in Wales peaked at 385 during the year to 31st March 2015 and has since fallen by 21% (a reduction of 80 children).

Figure 16: The Numbers of Looked After Children by Legal Status in Wales



Source: Children looked after at 31 March by local authority and legal status (Stats Wales, 2018b)

The National Adoption Service (2018b) highlights that the challenge of recruiting sufficient adopters in Wales continues and is happening within a context where there are ongoing

²² Freeing Orders relate to where a child has been freed for adoption. No new applications may be made on or after 30 December 2005. They were replaced by Placement Orders which enable the local authority to place a child for adoption with any prospective adopters who may have been chosen by the authority. Unlike a freeing order, the effect of a placement order is that parental responsibility for the child is shared – the extent to which is decided by the local authority – between the local authority and the child’s parents. The order continues in force until it is revoked, an adoption order is made in respect to the child, the child marries, or the child reaches 18. While the placement order is in force, the child retains its looked after status.

increases in the numbers of children identified by local authorities as requiring an adoption. The level of Placement Orders being granted by the Welsh courts is also rising. In the year to 31st March 2018, there were 308 children who left care as a result of adoption compared to 385 in the year to 31st March 2015, with 8% being adopted by former foster carers. The proportion being adopted by former foster carers has been falling for the last 10 years, with 19% of adoptions being by former foster carers in 2008-09 (Welsh Government, 2018c).

Decisions by the Family Court

Cafcass Cymru (2019) provides headline figures for the number of applications to Welsh Family Courts for care orders over time. Their data suggests that applications for care orders have increased by 66.3% since 2009 – from 651 to 1,037 in 2018. Data from the PLATO dataset compiled by the Ministry of Justice (2018) in relation to public law²³ family court cases in England and Wales between 2010 and 2017 provides an indication of where there is variation within Wales. Unfortunately, locally authority level data from Cafcass is currently only available for England.

The Designated Family Judge (DFJ) helps lead the family courts and manage its workload in distinct areas across England and Wales called DFJ areas. Each DFJ area has a Designated Family Centre which is the principal family court location for that area. This where all family applications from that DFJ area are sent for initial consideration. There are three DFJ areas in Wales:

North Wales – Anglesey, Gwynedd, Conwy, Denbighshire, Flintshire, Wrexham and Powys-North.

Swansea and South West Wales – Bridgend, Neath Port Talbot, Swansea, Powys-South, Carmarthenshire, Pembrokeshire and Ceredigion.

Cardiff and South East Wales – Cardiff, Merthyr Tydfil, Rhondda Cynon Taf, Vale of Glamorgan, Newport, Caerphilly, Torfaen, Blaenau Gwent and Monmouthshire.

In contrast to data presented elsewhere within this briefing, the figures presented in this section relate to applications and resulting orders over the course of the year as opposed to those in care on 31st March. Since several children may be involved in a single case without necessarily being subject to the same applications and orders, cases by child are used to make comparisons. A case by child refers to the case experienced by each child, counting each child separately (1 case may concern 3 children, which is counted as 3 cases by child).

²³ Public law refers to Children Act 1989 cases where there are child welfare issues and a local authority, or an authorised person, is stepping in to protect the child and ensure they get the care they need. This is distinct from private law (i.e. Children Act 1989 cases where two or more parties are trying to resolve a private dispute). This is commonly where parents have split-up and there is a disagreement about who their children should live with and who their children should have contact with, or otherwise spend time with and when.

To enable comparisons to be made between each DFJ area given that they differ in size, rates are once again used with the Ministry of Justice providing details of cases by child per 100,000 children resident in that area using the 2017 mid-year population estimates (Office for National Statistics, 2018a).

Applications for a care or supervision order may be made on their own or alongside other family proceedings. Although it should be noted that it is unusual (though not impossible) to apply for a supervision order in its own right - generally supervision orders emerge as a result of an application for a care order. Both care and supervision orders have the same threshold, however, the two orders are different. Care orders give the local authority parental responsibility for the child and give the local authority the power to determine the extent to which the child's parents and others with parental responsibility (who do not lose their parental responsibility on the making of the order) may meet their responsibility.

In contrast, supervision orders are designed to allow the local authority to keep a reasonable amount of control over the child where there is a risk of harm but not enough harm to constitute a care order. Thus, children subject to a supervision order are not looked after but will be included in the cohort receiving care and support. Under a supervision order, directions can be made, which are sometimes relevant for older children (e.g. requiring them to live in a specific place in the case of a child who persists in returning to the home of a person who is a risk), or requiring them to attend medical appointments (e.g. a child with anorexia or self-harming or other diagnosed mental health problems). There may be other circumstances in which directions are appropriate.

A supervision order does not give the local authority parental responsibility, rather it gives them the legal power to monitor the child's needs and progress whilst the child lives at home or somewhere else. Whilst the supervision order is in force, it places the child under the supervision of the local authority or probation officer. It is the duty of the supervisor to advise, assist and befriend the child and take the necessary action to give effect to the order. In practice this means that social workers will give help and support to the family as a whole. A supervision order can last for one year and may be extended yearly to a total of three years.

As part of a case, there may be multiple applications. For example, if a child was subject to a care and supervision application, received a care order, and had a subsequent special guardianship application and a special guardianship order, this would be represented as a "care + supervision + special guardianship" application resulting in a "care + special guardianship" order. Table 8 summarises the numbers of applications by group in Wales²⁴.

²⁴ Further details of how these groupings have been arrived at can be found in Appendix 1.

Table 8: Public Law Applications by Case and Cases by Child, Wales 2017, by Category

Category	Cases		Cases by Child
	Number	Number	Rate
Care order	909	1,399	222.7
Discharge of care	104	145	23.1
Other	56	75	11.9
Care + special guardianship	27	34	5.4
Care + supervision	0	10	1.6
Supervision	8	10	1.6

Source: PLATO (Ministry of Justice, 2019).

For convenience, these categories have been further grouped to reflect where an application has involved the respective orders (see Appendix 1, Table A1). For example, the categories of care, care + special guardianship and care + supervision include an application for a care order. Whilst it is recognised that this results in overlapping groups, it provides a clearer picture of the number and rates of each order both in terms of applications and resulting orders. Using these groupings, it suggests that there were 1,443 application cases by child involving care orders, equivalent to a rate of 229.7 per 100,000 of the child population in Wales.

Whilst the local authority may submit an application for a particular order, the outcome may differ. For example, of the 1,673 applications made to the Family Court in Wales in 2017, there were:

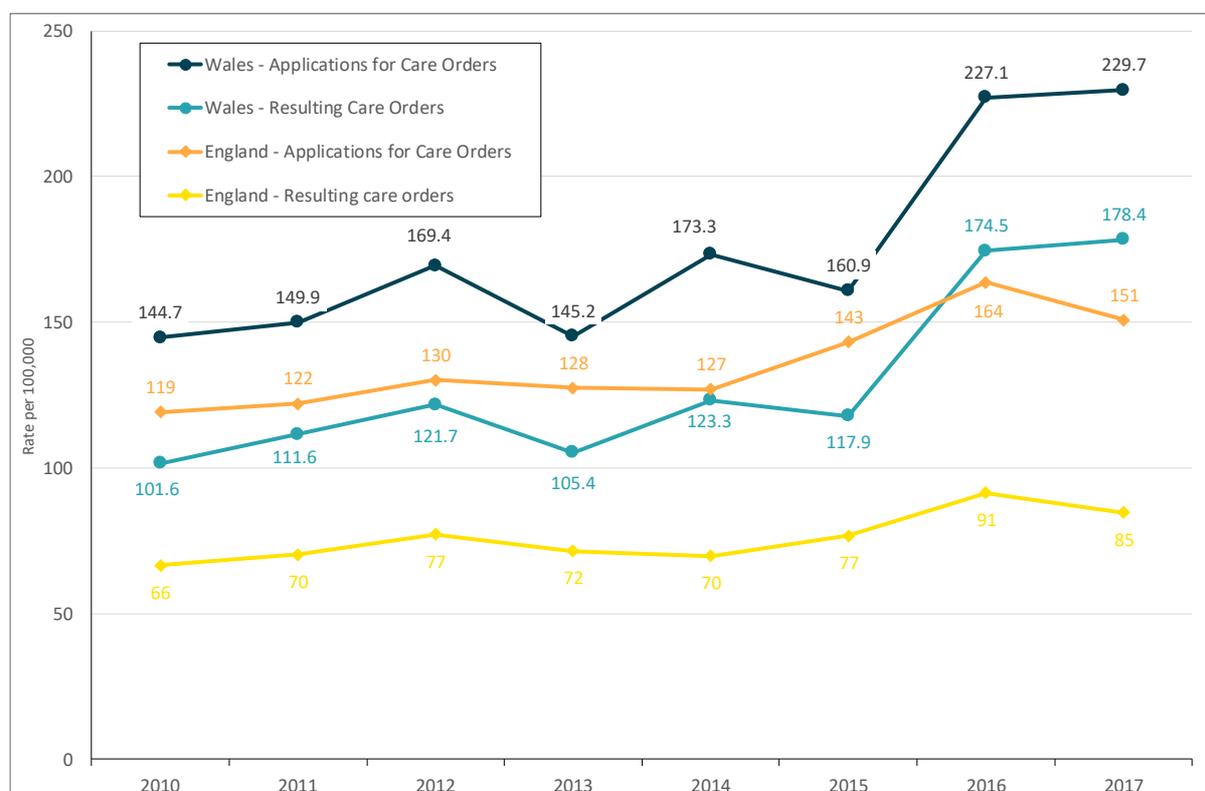
- 1,399 applications for care resulting in 1,092 care orders – equivalent to a conversion rate of 78.1%. Whilst 31 applications resulted in no order/refused/withdrawn, there were 121 which resulted in a supervision order; 62 which resulted in special guardianship being granted; 10 which resulted in a combination of a supervision order and special guardianship; and 73 which resulted in other orders.
- 10 applications for care + supervision. However, due to small numbers, a breakdown is not provided for Wales in terms of the resulting orders.
- 34 applications for care + special guardianship. Of these 7 resulted in care orders, 15 in special guardianship and 8 in supervision orders.
- 145 applications were made to by either parents or the local authority for a discharge of care order, returning the child to the parental home. 54 of these were granted; 40 resulted in no order/refused/withdrawn; 11 in special guardianship orders; 8 in supervision orders and 28 in other orders
- Additionally, of the 75 applications for other orders, 6 resulted in a care order being obtained.

In an attempt to further simplify the data and enable comparisons to be drawn between Wales, England and its constituent regions, two measures have been used:

- Numbers of cases by child involving applications for care orders per 100,000 of the local child population
- Numbers of resulting care orders per 100,000 of the local child population

The rate of applications for and resulting care orders per 100,000 children in the local population highlights a marked difference between Wales and England with 229.7 application cases by child for care orders in 2017 per 100,000 Welsh children compared to approximately 151 per 100,000 English children. There were also more resulting care order cases by child – 178.4 per 100,000 Welsh children compared to 85 per 100,000 English children in 2017. As can be seen from Figure 17, this trend is apparent for each year between 2010 and 2017.

Figure 17: Rates per 100,000 Applications for and Resulting Care Orders per Child



Source: PLATO (Ministry of Justice, 2019). Note: The rates for England have been calculated by considering the difference in the numbers for Wales to that for England and Wales. These have then been translated into a rate per 100,000 children using the 2017 mid-year population estimates (Office for National Statistics, 2018a). Since the England figures are approximate, they are presented to nearest integer. Rates have been calculated on the basis of cases by child involving the named order ie 'Care' involves applications / resulting orders for care; care + special guardianship and care + supervision.

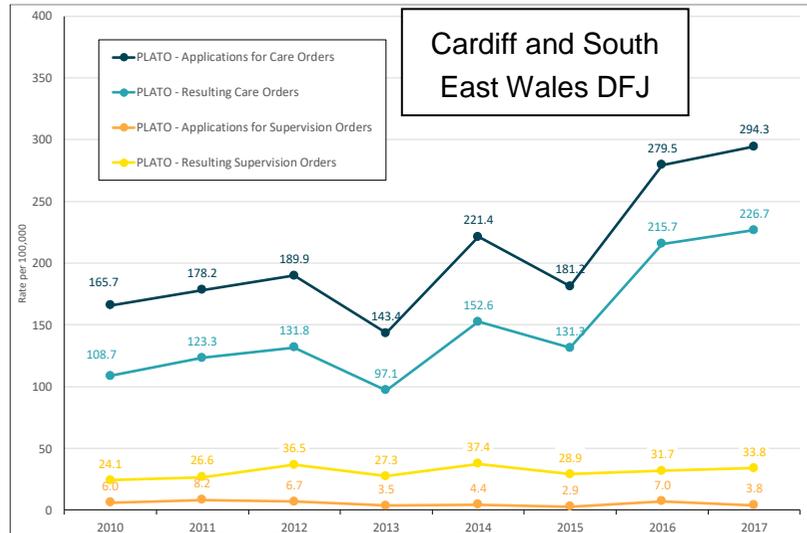
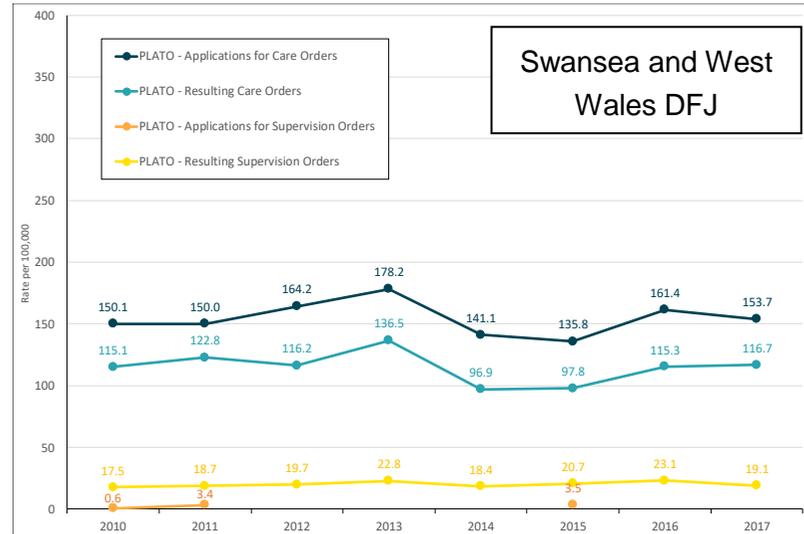
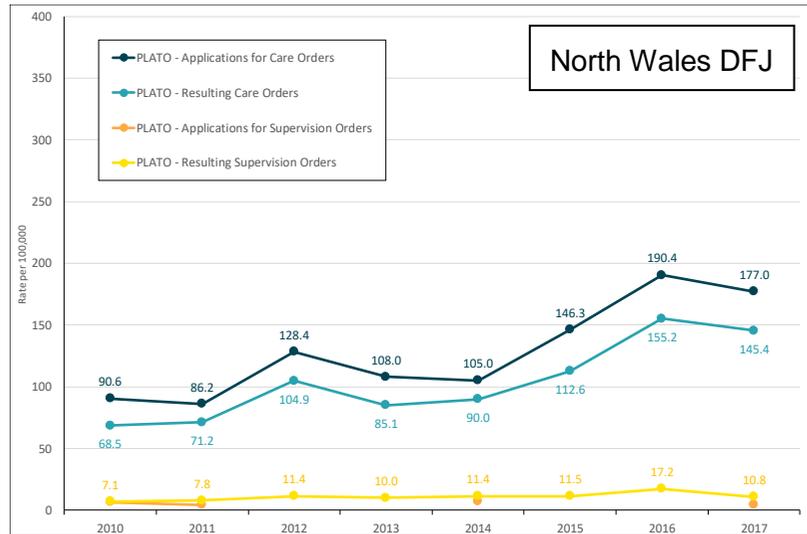
There is also disparity within Wales (Figure 18). Notably, the rates of applications for and resulting care orders is higher in Cardiff and South West DFJ, although the respective rates did fall in 2013 and 2015. The respective rates in Swansea and South East DFJ fell between 2013 and 2015, and have started to increase again. The timing of these shifts is significant since they broadly coincide with the decisions of *Re N* [2015] EWCA Civ 1112 and *Medway Council v M and T* [2015] EWFC B164²⁵. These came at the end of the increasing wave of concern about social workers' misuse of section 20 of the Children Act 1989/section 76 of the 2014 Act in Wales. The increased scrutiny that resulted from these led to an increase in section 20/section 76 arrangements being converted into interim care order applications; hence the increase in care order applications (Stevenson, 2017).

This is likely to also be a contributory factor explaining the variation across the 3 Welsh DFJs. However, there is also potential for the threshold criteria to be differently interpreted and/or that at designated family court level there are different expectations around whether the burden of proof has been established. The availability of family support within a local authority may also be a factor.

In both England and Wales, and across the 3 DFJs, the rate of applications for supervision orders (which do not result in looked after status) is lower than that for resulting orders. This is due to a high proportion of supervision orders having resulted from applications for other types of orders. For example, in 2017, across England and Wales, 90.5% of the resulting 'supervision' orders were issued following an initial application for a 'care' order. The proportion was slightly higher in Wales where of the 155 Welsh applications which had resulted in a supervision order being issued by the family court, 142 had started as an application for a care order (91.6%%). In England, the proportion was estimated to be 90%.

²⁵ In *Medway Council v M & T (By Her Children's Guardian)* [2015] EWFC B164 (13 October 2015), HHJ Lazarus found that Medway Council had acted unlawfully by removing the child without the consent of the mother who had mental health difficulties and was hospitalized. The mother was not informed of the child's whereabouts until six months after her release from hospital.

Figure 18: Rates per 100,000 Applications for and Resulting Orders per Child: Care and Supervision Orders



Source: PLATO (Ministry of Justice, 2019)

Note: The rates have been calculated on the basis of cases by child involving the named order ie 'Care' involves applications / resulting orders for care; care + special guardianship and care + supervision.

Not only is the rate of applications by child involving care orders higher in Wales than in England, so is the conversion rate (i.e. the proportion of applications which resulted in the decision to issue that type of order, including where in combination with another order) for care orders (Table 9).

Table 9: The Proportion of Cases by Child involving Care Order Applications that Resulted in Care Orders, by Start Year

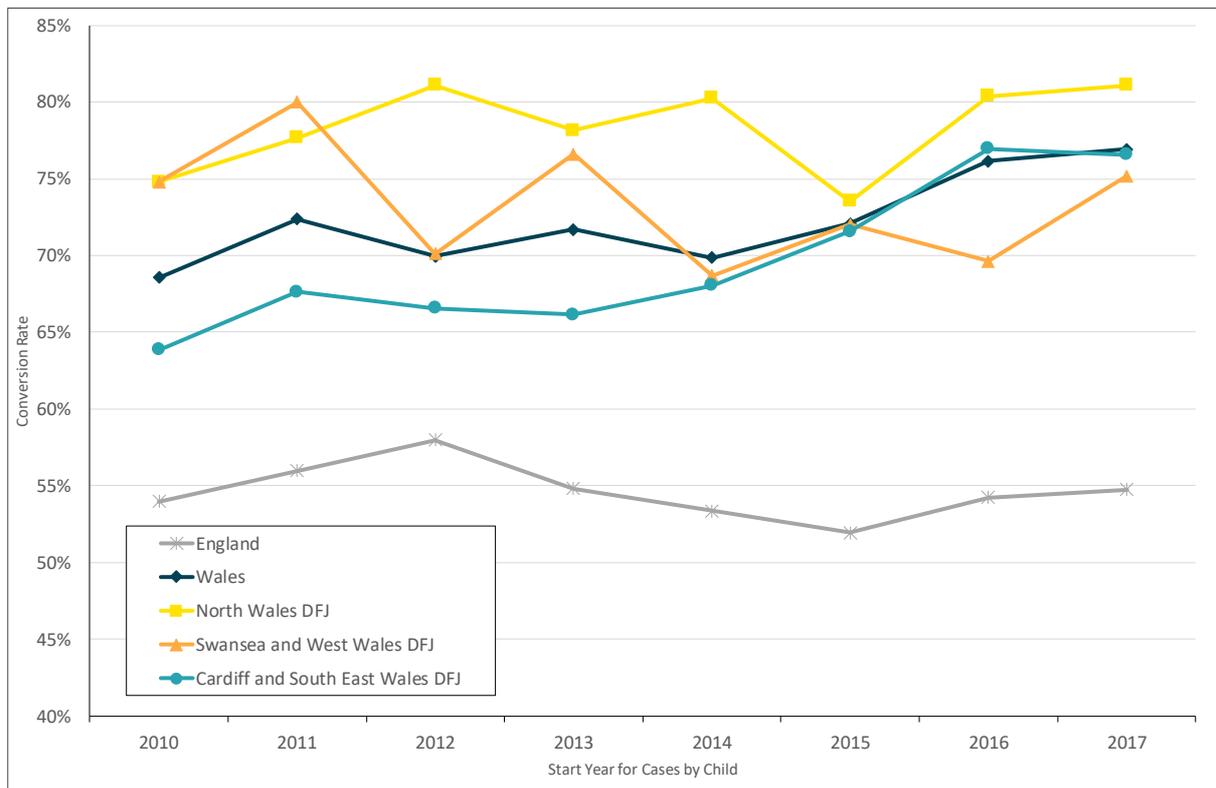
	2010	2011	2012	2013	2014	2015	2016	2017
England	54%	56%	58%	55%	53%	52%	54%	55%
London	48%	45%	45%	38%	36%	39%	40%	36%
Midlands	61%	62%	64%	60%	60%	59%	63%	57%
North East	56%	55%	57%	56%	52%	60%	55%	63%
North West	61%	68%	69%	67%	65%	54%	64%	65%
South East	49%	53%	55%	53%	49%	46%	50%	50%
South West	45%	49%	51%	46%	50%	50%	47%	49%
Wales	69%	72%	70%	72%	70%	72%	76%	77%
North Wales DFJ	75%	78%	81%	78%	80%	74%	80%	81%
Swansea and West Wales DFJ	75%	80%	70%	77%	69%	72%	70%	75%
Cardiff and South East Wales DFJ	64%	68%	67%	66%	68%	72%	77%	77%
England and Wales	55%	57%	59%	56%	54%	53%	56%	56%

Source: PLATO (Ministry of Justice, 2019). Note: Conversion rates for England have been calculated by considering the difference in the data for Wales to that for England and Wales. Rates have been calculated on the basis of cases by child involving the named order ie 'Care' involves applications / resulting orders for care; care + special guardianship and care + supervision.

These figures suggest that Wales has a higher proportion of cases by child with care order applications which resulted in a care order than England, and has done in each year for which the data is available. Notably Wales also has a higher conversion rate for care orders than each of the constituent regions in England between 2010 and 2017.

Data is also available by DFJ which enables the situation within Wales to be considered over the same period (Figure 19). This suggests that the conversion rate is notably higher in North Wales DFJ than in the other two areas. Between 2010 and 2017 the conversion rate has increased from 75% to 81% in North Wales DFJ. During the same period, the rate in Swansea and West Wales DFJ has fluctuated the most, but is currently at the same rate as in 2010 whilst that in Cardiff and South East Wales DFJ increased from 64% to 77%.

Figure 19: The Proportion of Cases by Child involving Care Order Applications that Resulted in Care Orders, by Start Year



Source: PLATO (Ministry of Justice, 2019). Note: Conversion rates for England have been calculated by considering the difference in the data for Wales to that for England and Wales. Rates have been calculated on the basis of cases by child involving the named order ie ‘Care’ involves applications / resulting orders for care; care + special guardianship and care + supervision.

Use of supervision orders as an alternative to removing the child from the family home appears to be lower in Wales, with just 1.2% of application cases by child involving supervision orders in 2017 compared to around 9% in England. Of the constituent regions, only the North West has similarly low proportion (1.9%).

Placement Type

Providing a secure, caring environment can help looked after children overcome their early life experiences. Therefore, it is necessary to accommodate children looked after in a placement which is appropriate to their individual needs and circumstances. In the UK the dominant trend has been to place children with foster families as this is seen as offering stability²⁶. This has also given rise to increases in kinship care. However, models of care elsewhere have a different emphasis. For example, Hart et al. (2015) identify that ‘English-speaking countries tend to place only a small proportion of their looked-after children in residential care compared with mainland Europe ... other countries such as Denmark, Germany and France, make much more use of part-time respite and shared care arrangements, with parents still actively involved in the child’s care.’ They raise the policy question: *What is residential care for?*. At the moment, residential care is predominately, but not exclusively used for older or more troubled children within the care system. As such residential care is perceived to be a last resort for some. Whilst Hart et al. have focused specifically upon residential care in England, there has been a similar rhetoric in Wales.

Research suggests that where children feel like they do not have enough control over their lives; are unhappy or bored in their care placement, or want to return to their family, they may run away. Going missing can leave children vulnerable to physical abuse, grooming and sexual exploitation (Coffey and All Party Parliamentary Group for Runaway and Missing Children and Adults and All Party Parliamentary Group for Looked after Children and Care Leavers, 2012).

Many children move repeatedly in and out of care, or between placements. In 2017/18, 28% (1,770 children looked after) had two or more placements during the year (Stats Wales, 2018e). Not only is there is need to provide a secure, caring environment, but it is also important that children have a sense of permanence since placement breakdowns can have a detrimental impact on a child's emotional wellbeing and mental health. It can also prevent them forming stable relationships with the adults who could help protect them (Rahilly and Hendry, 2014).

Nearly two-thirds (64%) of those children receiving care and support will be living in the family home with the child and/or their parents benefiting from social services support. However, those who are looked after will have been accommodated by the local authority. As at 31st March 2018, 74% of Welsh children looked after were accommodated in foster care placements. The remainder were mostly placed with parents, at secure children’s

²⁶ McCartan et al. (2018) highlight that ‘It is a requirement of the Children Act 1989, that local authorities consider kinship care before placements with unrelated carers for a number of reasons: (1) it is considered better to keep the child within the extended family; (2) in a setting which is probably familiar to the child; (3) the placement outcomes are often better; and (4) it is the most cost effective and time efficient placement option for a social worker.’

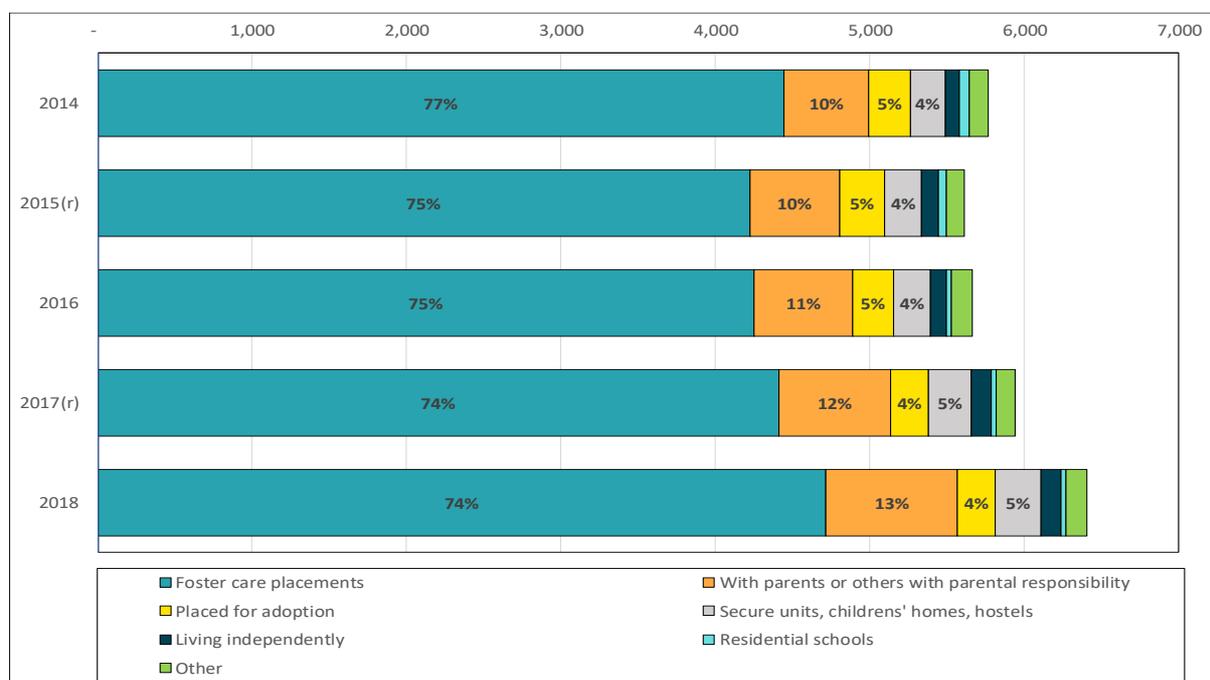
homes, children’s homes, hostels or placed for adoption. A relatively small proportion were living independently or at residential schools (Figure 20).

Whilst the respective proportion of children looked after who are in foster placements has been falling since 2011, the increases in the size of the cohort mean that the actual numbers which are accommodated in this way have been increasing since 2014 (from 4,220 to 4,715, equivalent to an increase of 11.7%).

The proportion who are placed with their own parents or others with parental responsibility has also been increasing, with more than one in eight (13.3%) children looked after accommodated in this way as at 31st March 2018. The actual number placed with their own parents or others with parental responsibility has increased 56% (from 545 in 2014 to 850). In contrast the numbers being placed for adoption has been falling, albeit at a slower rate – over the last 5 years the number on 31st March has fallen by 9.4% (from 265 to 240).

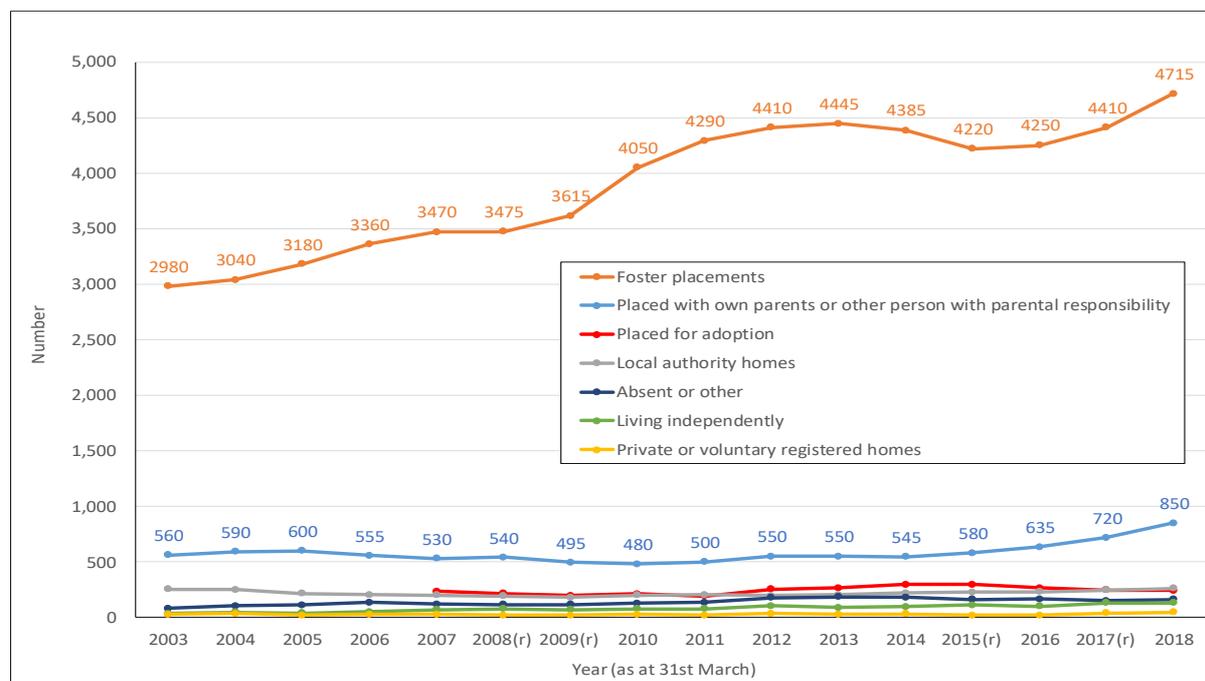
Compared to England, the proportions in foster placements and placed for adoption were broadly similar as at 31st March 2018. However, Wales had a higher proportion placed with parents (13.3% compared to 6% in England).

Figure 20: Placements of Children Looked After at 31st March, 2014 to 2018



Source: SFR 112/2018 (Welsh Government, 2018c). Notes: Other includes residential care homes, NHS/Health Trust or other establishments providing medical or nursing care, family centre or mother and baby unit, Youth Offender Institution or prison, whereabouts unknown.

Figure 21: Placements of Children Looked After at 31st March, Long Term Trends

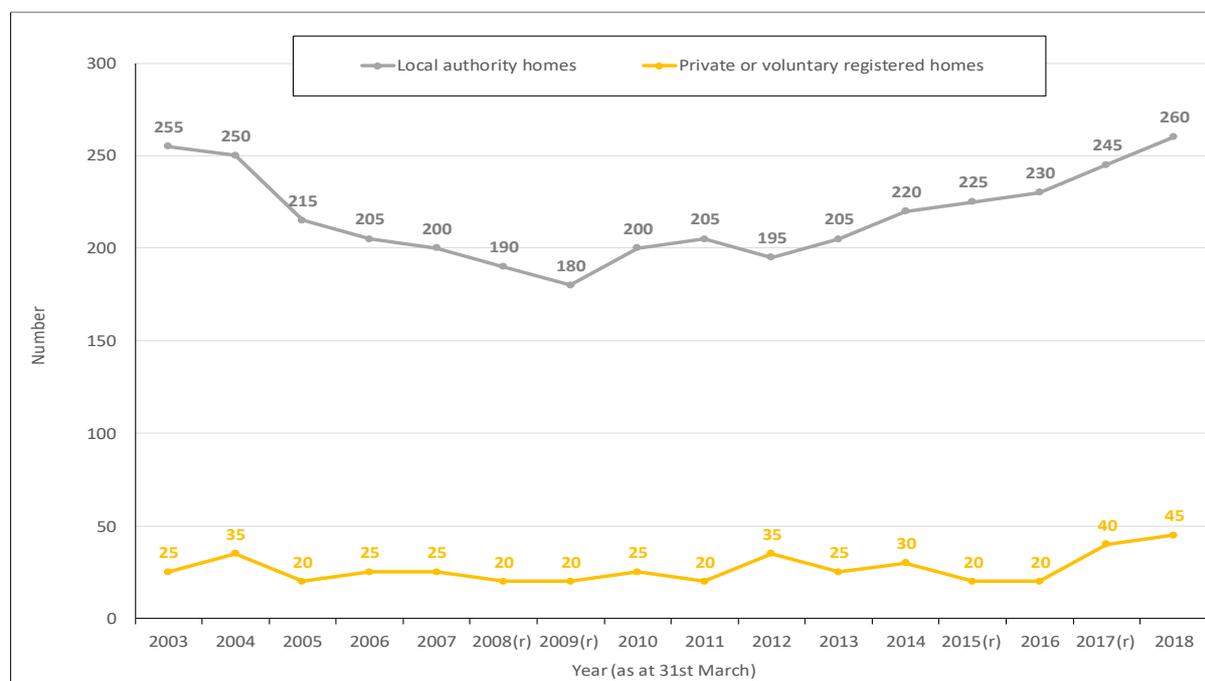


Source: Looked After Children Census, Stats Wales (2018c). Note: Placements types on Stats Wales have not yet been updated to reflect the revised guidance and hence are grouped differently in the published report compared to on Stats Wales. Broadly speaking, 'Absent or other' is included in the 'Other' category along with those placed in 'Residential schools'. Those placed in 'Local authority homes' and 'Private or voluntary registered homes' fall within the 'Secure units, children's homes, hostels' category.

Children's Homes

Those living in children's homes, either maintained by the local authority, privately or voluntary registered, represent less than 5% (299 children) as at 31st March 2018. However, concern has been raised about rising placement costs and ability of some homes to meet the needs of children placed there (Public Accounts Committee, 2018). Notably some local authorities began to sell off their provision – a trend which has now been reversed for example in Newport and some areas in North Wales. Local authority run children's homes continue to be the main provider of residential care in Wales, with the numbers having gradually increased since 2012. Whilst the numbers remain low, the number of children accommodated in privately or voluntary registered children's homes have been increasing since 2016. The availability of placements in children's homes located long distances from family and/or outside of Wales has also become an issue for concern. The way in which the data is presented on Stats Wales does not allow this to be explored, however, distinctions are made within the placement coding used within LAC Census.

Figure 22: Placements of Children Looked After at 31st March in Children's Homes, Long Term Trends



Source: Looked After Children Census, Stats Wales (2018c). Note: These figures exclude those children looked after who are accommodated for respite purposes.

Unfortunately, it is not possible from the aggregated data in the public domain to look at the needs, characteristics or legal status of children accommodated in children's homes (or other placement types). However, recent data analysis challenges the widespread perception that residential care is generally used to house older children and adolescents Elliott et al. (2018). This work found that 63% of those places in residential care at first entry were aged 13-17 years. This percentage, it is argued, is lower than many practitioners would think. In part this is because for a significant proportion of children in this age range in residential settings, have had previous experience of being looked after.

The placement type data presented on Stats Wales excludes those in short break/respite care. According to analysis undertaken by Data Cymru (2018) 40% of the beds available in registered children's homes were in short break/respite and disability only care settings. Nationally, the number of registered beds in residential care homes (excluding respite/disability) in Wales exceeds the number of children placed in residential care by Welsh Local Authorities. However, at a regional level, the Cwm Taf and Cardiff & Vale regions have a greater number of children looked after population than the number of general therapeutic and specialist places available in children's homes in these regions. As at 31st March 2017, over 90 beds in residential care homes in Wales were occupied by children placed by authorities outside Wales (Data Cymru, 2018).

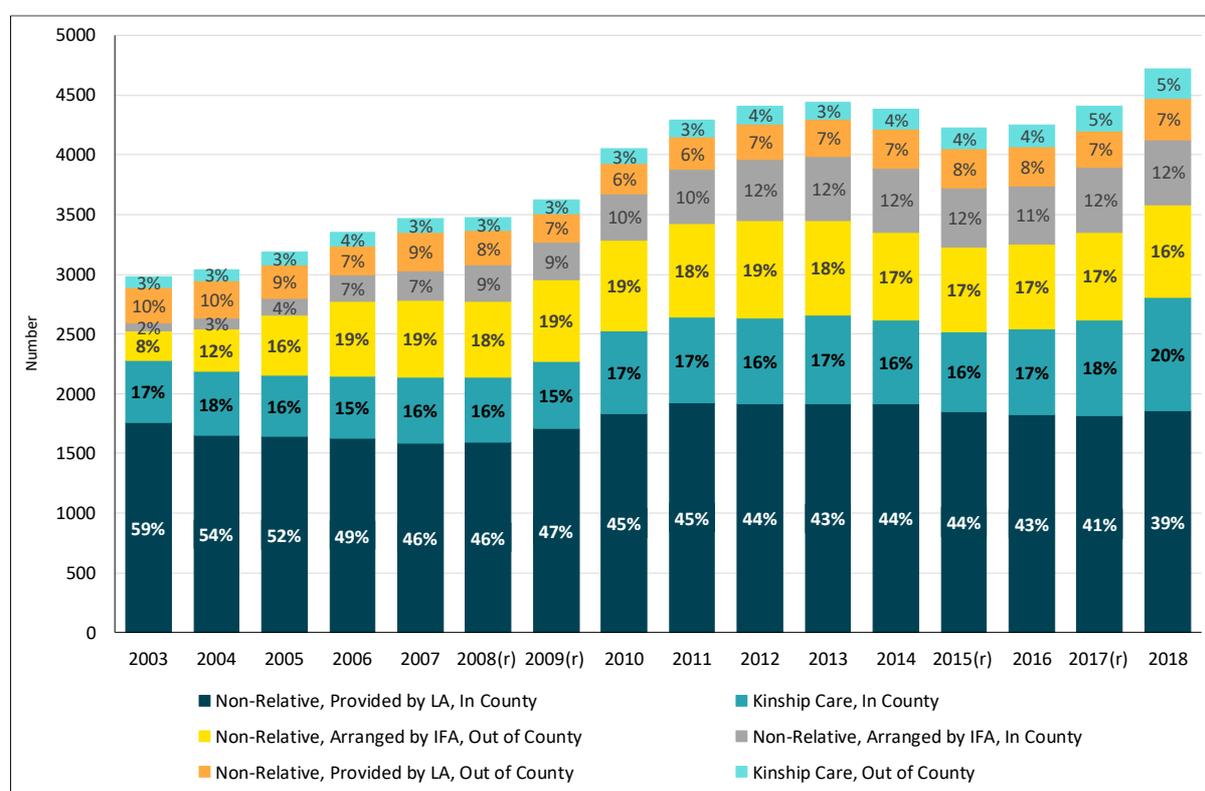
Figures potentially include unaccompanied asylum-seeking children aged under 18 for whom the local authority concluded, as part of a formal decision-making process, that in order to safeguard and promote the child's welfare, they should be looked after. They are

regarded as being accommodated by voluntary agreement under section 76 and are normally placed in foster or residential care.

Foster Placements

Those children looked after who are in foster placements can be placed with approved foster carers who are a relative or friend (“kinship foster carers”), or with other foster carers (“non-relative foster carers”). Carers can be either located within the local authority or outside, including outside Wales. Where the child is placed with a non-relative foster carer, the placement could be with a carer provided by the local authority or one externally commissioned through an independent foster agency. Foster carers do not have parental responsibility for the child they are looking after - if the child is under a care order, the local authority shares parental responsibility with the parents. The profile of the type of placements has changed over time as can be seen from Figure 23.

Figure 23: Types of Foster Placements for Children Looked After at 31st March, Long Term Trends



Source: Looked After Children Census, Stats Wales (2018g). Notes: IFA – Independent Foster Agency, LA – Local Authority. These figures exclude those children looked after who are accommodated for respite purposes.

As at 31st March 2018, one in four foster children were living with a kinship foster carer - equivalent to almost one in five children looked after (19%). This includes both immediate and emergency placements. Based on the 2011 Census, it was estimated that around half of ‘kinship’ carers are grandparents, but could include other relatives such as older siblings, aunts, uncles, as well as family friends and neighbours (Grandparents Plus, 2016) .

However, no distinction is made within these figures between informal arrangements made by the child's parents; where the child is subject to a Child Arrangement Order (e.g. following a divorce) or SGO; or where the child is looked after the local authority and placed with approved kinship foster carers.

Kinship foster care is seen as being beneficial to the child since they are kept within the family network. There also tends to be increased placement stability, and where appropriate, the child is able to maintain family relationships. Indeed the systematic review undertaken by Winokur et al. (2014) found that 'children in kinship foster care may do better than children in traditional [non-relative] foster care in terms of their behavioural development, mental health functioning and placement stability. Children in traditional foster care placements may do better with regard to achieving adoption and accessing services they may need.' However, this finding may be skewed by the fact that children with fewer problems are more likely to be placed with kinship foster carers.

If a kinship foster placement is a long term one and there are no plans for the child to return to their parents, then the carer may consider applying for a SGO. This would mean that the child would no longer be a looked after child and that the financial support available for the carer would also change.

The numbers placed with approved kinship foster carers have almost doubled since 2004 (from 625 to 1,200, an increase of 92%) and this type of foster placement has seen the greatest growth in recent years – the number accommodated in this type of placement increasing by 39% in the last 5 years. Whilst the majority (79%) are placed with carers living within the local authority ("in county"), roughly one in five is placed with relatives or friends who live outside the geographical boundary ("out of county") although potentially this could be a neighbouring authority.

The highest proportion of children are placed with non-relative foster carers, provided by the local authority, in county. However, whereas in 2003 almost six out of ten (59%) fostered children were accommodated in this way, the proportion has now fallen to almost four out of ten (39%). Although it should be noted that the actual number has fallen by 3% in the last 5 years from 1,915 to 1,860. Notably during the same period there has also been a slight decrease in the proportion of children placed by local authorities out of county with non-relative foster carers. In this instance the actual numbers have increased by 5% over the same period (from 325 to 340).

Between 2014 and 2018, there has been little net change in the overall numbers placed with non-relative foster carers despite the increasing size of the cohort. However, two trends are apparent if the longer-term trends are considered. They highlight that in the last 15 years:

- 1) The numbers accommodated in foster placements provided by the local authority have increased by 12% (from 1,965 to 2,200) whilst the number placed by independent foster agencies has increased by 193% (from 450 in 2004 to 1,320 as at 31st March 2018).

- 2) Whilst there are currently twice as many foster children placed within the local area compared to elsewhere, the numbers placed with non-relative foster carers out of county have increased at a greater rate than that for being placed in county - the numbers placed in county increased by 38% (from 1,740 to 2,405) whilst those placed out of county increased by 65% (from 675 to 1,115).

The shift in the balance between foster placements provided by the local authority and those arranged through an independent foster agency has been a cause of concern, with evidence submitted to the Public Accounts Committee (2018) suggesting that the average annual cost of a local authority placement is £23,327 compared to £43,378 for a placement arranged through an independent foster agency. Whilst it is acknowledged that the use of independent agencies often occurs where children have additional needs or need to be placed out of county, and hence direct comparisons should not be made, there are stark differences in the costs.

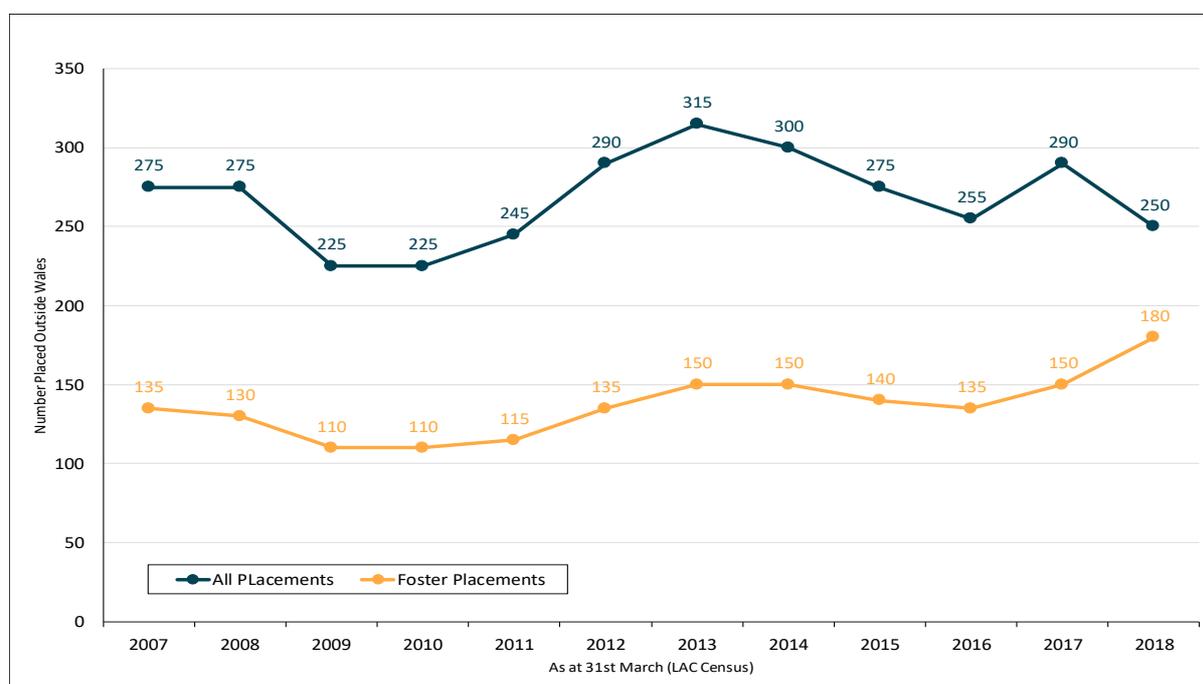
The number of suitable foster carers, particularly for those with specialist needs has contributed to the increased use of independent foster agency placements and increases in the numbers placed both out of county and also outside Wales. Allowances available to carers can also differ, with some independent fostering agencies offering 'golden hellos' to encourage carers to leave their council.

Location of Placement

Concern has been raised about increasing numbers being placed long distances from home and particularly outside Wales. Whilst sometimes these placements are for good reasons, for example where a child is living with relatives there is the greater opportunity for the child to maintain their sense of identity, for some who are placed out of area, being placed a long distance from home will separate them from their family, community, school and friends. As a result, they can find themselves in a strange environment with a different culture and potentially a different language. It can also become challenging for the local authority to provide the best possible support for such children. The Welsh Government has recently made a commitment to reduce (1) the numbers placed outside Wales and (2) the numbers placed 'out of county'.

Since 2007 the number placed outside Wales (predominately in England) has remained broadly stable at around 5% of children looked after (Figure 24). On 31st March 2018, the 250 children placed outside Wales included 180 children in foster care provision outside the country.

Figure 24: Out of Country Placements for Children Looked After at 31st March



Source: Looked After Children Census, Stats Wales (2019a). Note: These figures exclude those accommodated for respite purposes.

Summary of Findings: Policy and Practice

Local authorities are responsible for setting the thresholds at which they decide to work with vulnerable children and are therefore responsible for managing demand for their own children’s social care. However, they do not operate in isolation, with the PLATO data suggesting that there is also variation within the judiciary. Together, these contribute to the variations in the rates of children looked after between local authorities in Wales.

The absence of local authority level data related to the rate of applications for, and resulting care orders in Wales means that it is difficult to quantify the degree to which these differences in policy and practice contribute to variation in Wales. However, the analysis presented here suggests that relative to England and its constituent regions, not only are the rates of applications for care orders higher, but the conversion rate into care order is also higher. Within Wales, differences in the application and conversion rates for care orders also points to there being variation in practice across the three DFJ areas.

Both Wales and England have seen a fall in the numbers accommodated under a single voluntary agreement. This coincides with the increased scrutiny placed on the use of section 20/section 76 arrangements, which led to increases in these being converted into interim care order applications and hence the increase in care order applications.

Although it has been hypothesised that variation within the same jurisdiction may be partly linked to expenditure relative to demand, and hence be potentially reflective of patterns of deprivation, this is not something that that can be directly measured using the available data.

However, based on the snapshot data, it would appear that **the respective proportion of the cohort receiving care and support who are receiving more intensive services (i.e. are within the safeguarding cohort because they are either looked after or on the child protection register) explains approximately 19% of the variation in local authority rates.** What is significant is that the amount of variation accounted for is comparatively low highlighting the complexity of this issue and the fact that there are multiple factors which may well interact differently in each local authority. The potential link to levels of deprivation – which explains around half of the variation in rates - has been investigated (Figure 13). However, given the limitations of the measure used to do this, it is difficult to prove or disprove this.

As the number of children looked after has increased in Wales, there has been:

- 1) An increase in the number of placed with foster carers (although the proportion of placements that these represent is declining)
- 2) More significantly increases in placements with friends and family

This is happening in the context of a 10% decrease in the numbers being adopted.

Parenting Capacity

Parenting capacity forms a key part of the assessment framework (Figure 1), with the local authority having a duty to assess children who appear to need care and support in addition to, or instead of the support provided by their family²⁷. Two measures within the CRCS Census provide indicative information about parenting capacity. The primary category of need provides information about the circumstances surrounding the child at the time of starting their current period of care whilst parental factors provide an indication of issues which are contributing to the parents' diminished parental capacity.

Category of Need

The ability of the parent (or carer) to respond appropriately to the child's developmental needs and prevent them from harm are an intrinsic part of the reason why it may be deemed necessary for the child to be looked after. Table 9 summarises the recorded category of need for those children looked after as at 31st March 2018. It is important to note that since there is only scope for the primary category of need to be recorded, there is the significant

²⁷ In the case of children looked after, this will largely be instead of the support provided by their family since the local authority will typically have acquired parental responsibility for the child under a care order. Where a child is being voluntarily accommodated, the parents retain all their legal rights, and can require the child's return at any stage. However, this type of arrangement is not appropriate where the parent is not capable of giving fully informed consent or if the child is at risk of abuse or neglect to the extent that the threshold criteria for care proceedings is reached.

risk that this is does not accurately represent the complexity of the child's circumstances at the time of their current period of care. Notably there can be difficulties associated with the way in which 'need' is thought about and recorded. For example, a family may have financial problems, which exacerbate violent arguments, and in turn these are sometimes made worse by heavy drinking by a parent, which has led on some occasions to physical assault of a child. Whilst practitioners may agree about the presence of financial problems, family dysfunction, physical abuse and possible parental addiction, but deciding which of these is the 'main' need is more difficult (Forrester et al., 2007).

Across Wales, two-thirds (68%) of children looked after on 31st March 2018 were recorded as having their primary need as abuse or neglect, with the proportion ranging from 93% in Blaenau Gwent to just 13% in Vale of Glamorgan. However, the extent to which this is a 'real' difference is difficult to ascertain, particularly at a local authority level where difference in practice may be contributing to apparent differences in the coding.

Table 10: Looked After Children, by Category of Need, 31st March 2018

Need for Care and Support	Description	% of Cohort (n=6,100)
Abuse or neglect	Children in needs as a result of, or at risk of, abuse or neglect; also includes children at risk because of domestic abuse	68.3
Family dysfunction	Children whose needs primarily arise from living in a family where the parenting capacity is chronically inadequate.	14.4
Family in acute stress	Children whose needs arise from living in a family that is going through a temporary crisis that diminishes the parental capacity to adequately meet some of the children's needs.	7.9
Child's disability or illness	Children and their families whose main need for services arises because of the child's disability, illness or intrinsic condition.	2.7
Parental disability or illness	Children whose main need for services arises because the capacity of their parents (or carers) to care for them is impaired by the parent's (or carer's) disability, physical or mental illness, or addictions.	2.4
Absent parenting	Children whose need for services arise mainly from having no parents available to provide for them.	2.3

Socially unacceptable behaviour	Children and families whose need for services primarily arise out of the child's behaviour impacting detrimentally on the community.	1.7
Adoption disruption	Main reason for the commencement of the period of being looked after was the disruption of an adoption.	0.2

Source: Children Receiving Care and Support Census where the child's status is children looked after on 31st March, Stats Wales (2019c).

Parental Factors

Given the overriding emphasis on safeguarding and promoting welfare, the role played by the parent (or carer) in bringing up the child forms an integral part of the assessment process, with the threshold criteria for a court order placing a burden of proof on the local authority to establish the harm or likelihood of harm that is attributable to the child's parents.²⁸

Based on the categories of need (Table 10), it suggests that at least one in seven (14%, 880 out of 6,100) of the children looked after on 31st March 2018 had been living in a family where the parenting capacity was considered to be chronically inadequate at the beginning of their current period of care. A further 8% (480) had parents whose parental capacity was diminished as a result of a temporary crisis. Whilst 2% (140) had been experiencing absent parenting – this will include those looked after as a result of being an unaccompanied asylum-seeking child. However, since only the primary category of need is recorded, these figures could be higher. Notably, a high proportion are likely to be at risk of physical and/or emotional harm as a result of their parents' behaviours e.g. domestic abuse or substance misuse.

The CRCS Census records whether or not specified parenting issues were present at 31st March 2018 for all children receiving care and report, including children looked after. Table 11 and Figure 25 summarise the prevalence of these parenting issues amongst the cohort. Significantly factors may have been present at the referral stage or may have arisen since the referral with one or more factors potentially being recorded for each child. These figures do not however, reflect whether the parent is known to adult services in their own right and if they are receiving support from them.

²⁸ Care orders can also be sought where the child is considered to be beyond parental control – see page 41 for further details.

Table 11: Looked After Children, by Presence of Parental Factor, 31st March 2018

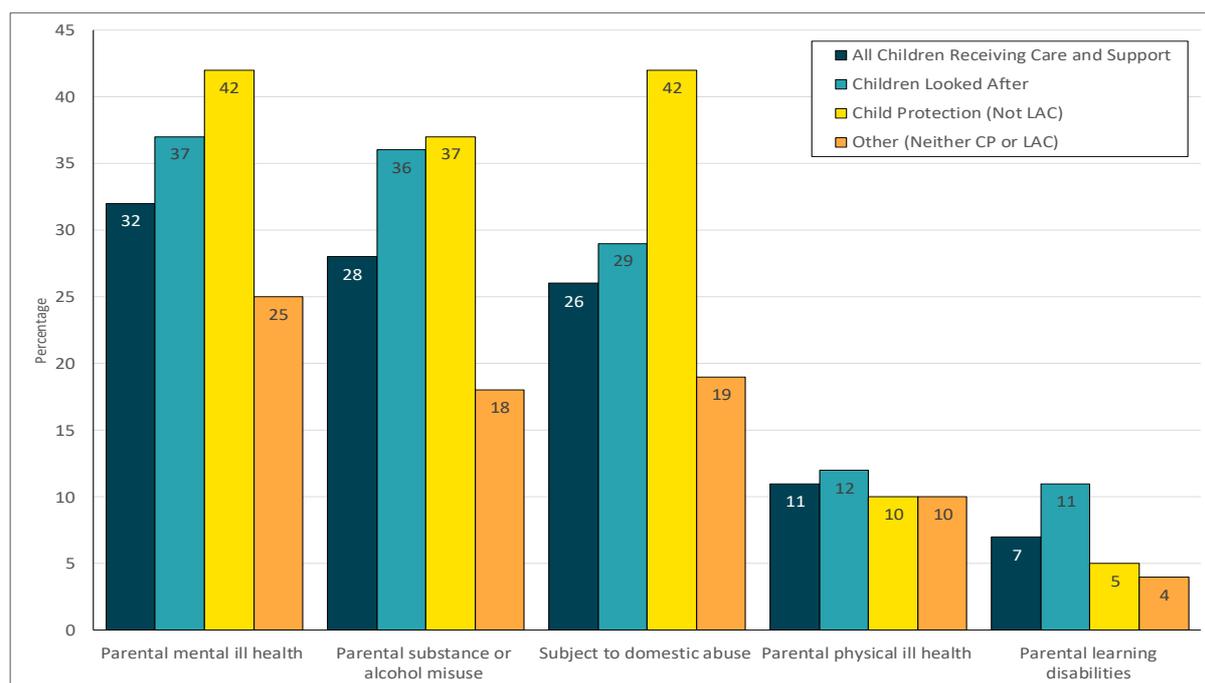
Parental Factor	Description	% of Cohort (n=6,100)
Parental mental ill health	If one or more of the parents or carers have a mental health problem. Includes mental health problems diagnosed by a medical practitioners; self-reported problems; and parents receiving services from the Community Mental Health Team. Includes depression; self-harming; and eating disorders. Excludes substance misuse, and Autistic Spectrum disorders and other learning disabilities.	37.2
Parental substance or alcohol misuse	If one or more of the parents or carers has a substance misuse problem ie intoxication by - or regular excessive consumption of and/or dependence on - psychoactive substances, leading to social, psychological, physical or legal problems. It includes problematic use of both legal and illegal drugs (including alcohol when used in combination with other substances).	36.3
Domestic Abuse	If one or more of the child's parents or carers has domestic abuse problems. Domestic abuse is physical, sexual, psychological or financial intimidation, violence or threats of violence that take place within an intimate or family-type relationship and that forms a pattern of coercive and controlling behaviour. This can include forced marriage and so-called 'honour crimes'.	29.4
Parental physical ill health	If one or more of the child's parents or carers has physical health problems that impair their ability to care for the child.	12.5
Parental learning disabilities	If one or more of the parents or carers has an impairment of intellectual function that significantly affects their development and leads to difficulties in understanding and using information, learning new skills and managing to live independently.	11.1

Source: Children Receiving Care and Support Census where the child's status is children looked after on 31st March, Stats Wales (2019g).

As can be seen in Figure 25, there are distinct differences between the respective proportions with each parental factor within the wider cohort. Typically, those within the children receiving care and support cohort who are either looked after or on the child protection register are more likely to have parents with substance misuse issues, mental ill-

health or domestic abuse problems (or potentially a combination of these) than those who are not receiving such intensive support. There is little difference in the respective proportions with parental physical ill health whilst there is a higher proportion of children looked after who have one or more parent with learning difficulties.

Figure 25: Looked After Children, by Presence of Parental Factor and Child Status, 31st March 2018



Source: Children Receiving Care and Support Census, Stats Wales (2019g)

Parental Disability or Illness

Whereas parental disability or illness was recorded as being the main category of need for 2% of the cohort at the start of their current period of care (Table 9), the information on parental factors (Table 9) suggest that over a third (37%, 2,270) had one or more parent with mental health problems; one in eight (12%) had one or more parent whose physical health problems impaired their ability to provide appropriate care and support for the child whilst almost one in nine (11%) had one or more parents with learning difficulties. Allowing for the potential overlap between these groups, this suggests a far higher proportion where parental disability or illness was a factor in the decision to take the child into care.

This is not to suggest that all parents with a disability or poor health are unable to appropriately care for their child(ren). However, there are some families who, in order to respond appropriately to their child’s needs, benefit from receiving additional support from social services. Additionally, it is important to remember that the wider cohort includes young carers who will have a support plan if they are providing care to someone else.

Notably there is only a small but significant difference in the respective proportions where physical ill health was a parental issue amongst those receiving care and support who have

remained in the family setting (i.e. those on the child protection register plus 'other') and those who are children looked after – 10.3% compared to 12.5% (Odds Ratio = 1.17 with a 95% confidence interval (CI) of 1.06 to 1.30)²⁹.

Where a child was experiencing parental mental ill health and receiving care and support on 31st March 2018, they are 44% more likely to be a child looked after (OR = 1.44, 95% CI: 1.34, 1.54) than be on the child protection register or other.

If the child has one or more parents with learning disabilities and is receiving care and support, then they are almost three times more likely to be accommodated by the local authority and hence be receiving care and support from social services instead of their parent(s) (OR = 2.80, 95% CI: 2.47, 3.18). Whilst the actual numbers are low – there were 1,100 children receiving care and support who had one or more parent with learning difficulties as at 31st March 2018, of whom 675 were looked after - reducing the number of children taken away from families on the grounds that parents have a learning disability is a priority for the Welsh Government.

Domestic Abuse

Those children on the child protection register, but not looked after were the most likely to be in homes where there was domestic abuse (42%). However, one in four (26%) of all children receiving care and support were identified as one or more of their parents experiencing domestic abuse problems. It is not possible to ascertain from the published data the extent to which parental mental ill health and/or substance misuse is also a contributing factor.

Where a child was subject to domestic abuse and receiving care and support, they were 29% more likely to be a looked after child than remain in the family home (OR = 1.29, 95% CI: 1.20, 1.38). However, it should be noted, that due to the risk of harm, where parents are experiencing domestic abuse problems, the child is more than twice as likely to be within the safeguarding cohort (OR = 2.09, 95% CI: 1.94, 2.24) than be receiving less intensive support.

²⁹ Results here are discussed in terms of odds ratios. The odds ratio shows how changes in the independent variable (in this case the presence of a parenting issue) influence the odds of the “event”. In this case, the “event” is being a child looked after”. Odds ratios higher than 1 indicate a positive relationship (i.e. more likely to be a child looked after if the parenting factor is present), and odds ratios lower than one indicate a negative relationship (i.e. less likely to be a child looked after if the parenting factor is present). The closer the odds ratio is to 1, the smaller the effect of the independent variable is. The confidence interval is included since this provides an indication of how certain we can be that this result did not happen by chance. In this instance the 95% confidence interval suggests that we can be 95% confident that the odds ratio lies between the lower and upper limit.

Parental Substance or Alcohol Misuse

Just over a third of children looked after (36%) were identified as having one or more parent with substance or alcohol misuse issues. This compares to roughly one in five (22%) of those who have remained in the family home but are receiving care and support from parents as well as social services. Where one or parents had a substance or alcohol misuse issue, the child receiving care and support is almost twice as likely to be looked after (OR = 1.98, 95% CI: 1.85, 2.12).

Table 12 summarises the odds of being a child looked after where parental factors are present relative to other children receiving care and support including those in the child protection register. The odds of being looked after where more than one of the parental factors is present cannot be calculated using the published data.

Table 12: Odds Ratios for Being a Child Looked After Where Parental Factors are Present, Relative to Other Children Receiving Care and Support

Parental Factor	Odds Ratio	95% Confidence Interval
Parental learning disabilities	2.80	2.47, 3.18
Parental substance or alcohol misuse	1.98	1.85, 2.12
Parental mental ill health	1.44	1.34, 1.54
Domestic abuse	1.29	1.20, 1.38
Parental physical ill health	1.24	1.13, 1.37

Source: Children Receiving Care and Support Census, by Child Status and Presence of Parental Factors (Stats Wales, 2019g).

What is the relationship between the ‘Trigger Trio’ and the rate of looked after children?

The toxic trio, now the ‘trigger trio’ (ADCS, 2018) is the interaction of:

- Domestic violence and abuse within the household
- Parental substance misuse (alcohol or drugs)
- Parental mental health issues

Each of these issues can have damaging consequences for the wellbeing and outcomes of children: see for example Cleaver et al. (2011). Notably the role that these play in the parenting capacity of those adults with one or more of these issues – and associated responses of frontline practitioners – have been cited as a major driver of the increases on children’s services caseloads and the numbers of children taken into care (ADCS, 2016).

The Office of the Children’s Commissioner for England has recently sought to estimate the prevalence of the ‘trigger trio’ and related issues within households with children in the general population (Chowdry, 2018). Whilst there are a number of limitations associated with this piece of work, not least that it is based upon data from a finite-sample study, it suggests

that in England an estimated 0.9% of all children are in a household where an adult faces all three of the 'trigger trio' issues to a severe extent, while 3.6% are in a household where that adult faces the 'trigger trio' issues to a moderate /severe extent. Applying these estimates to Wales suggest that there are potentially 22,600 Welsh children living in households where there is an adult experiencing all three of these issues to a moderate to severe extent with a further 5,700 children living in an adult who is experiencing all three issues to a severe extent. To put this into perspective, there are currently just over 16,000 children receiving care and support across Wales.

From a safeguarding perspective, not knowing the incidence of substance misuse and domestic violence within the general population makes it difficult to determine not only the potential demand for adult services which support those experiencing these issues, but also the number of children who could potentially be at risk of harm or not have their child development needs adequately supported as result of inadequacies in parenting capacity. Growing awareness of the detrimental effect these kinds of issues can have on children now means that a range of statutory and voluntary bodies are more actively engaged in safeguarding activities and the identification of those at risk. This is evident from shifts in the patterns of referral sources, with increasing numbers of referrals now coming via the Police, Primary/Community Health and other departments of own or other local authority (Stats Wales, 2018a).

The small number of local authorities in Wales does not lend itself to robust modelling³⁰. However, it has been possible to consider the relationship between each of the parental factors and the rate of looked after children at a local authority level. This suggests that the proportion of children looked after:

- Having one or more parent with mental ill health accounts for 25% ($R^2 = 0.25$) of the variation in the calculated 2018 rates; and
- subject to domestic abuse problems accounts for 21% ($R^2 = 0.21$) of the variation

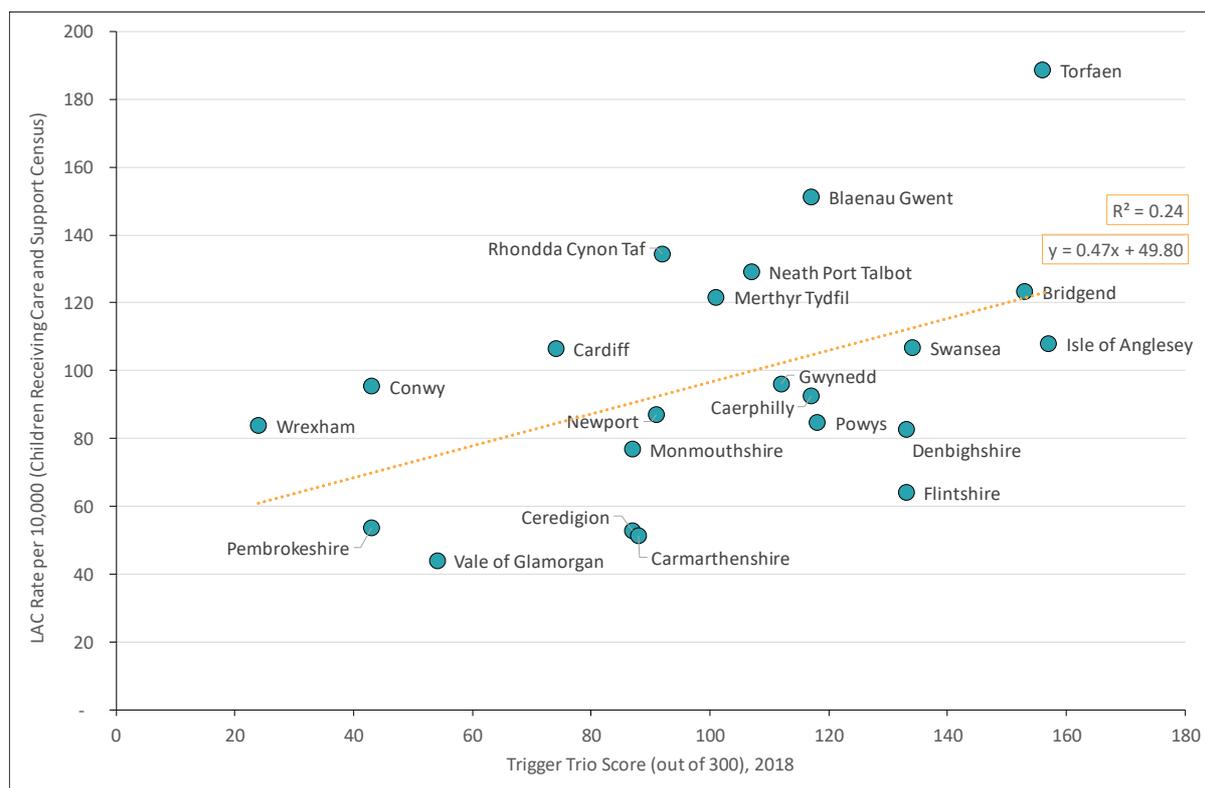
Respectively this means that 75% and 79% of the variation cannot be explained by these factors. As it is not possible to produce a traditional multiple regression model due to the small number of authorities, the figures are not cumulative and it is not possible to determine the effect of an interaction between these two factors, or any of the other parental factors within the table.

Using the published data means that it is not possible to looked at the proportion of children in each local authority who are experiencing one or more of the 'trigger trio'. As a proxy, a 'trigger trio score' has been determined which sums the reported percentage of children looked after subject to domestic abuse, with parental mental ill health and parental substance misuse for each of the local authorities (see Appendix 2 for details). As can be

³⁰ Multiple regression is not recommended for small samples. For example, Stevens (cited in Pallant, 2013) recommends 'for social science research about 15 participants per predictor are needed for a reliable equation'.

seen from Figure 26, there is a positive correlation between the score and the local authority rates of children looked after in 2018.

Figure 26: Looked after Children Rate, 2018 compared to the Trigger Trio Score



Source: Children Receiving Care and Support Census where the child's status is children looked after on 31st March has been used to determine the rate per 10,000 (Stats Wales, 2019d) along with the 2017 mid-year population estimates (Office for National Statistics, 2018a). Parental factors taken from Stats Wales (2019g). Notes: The 'Trigger Trio Score' has been calculated as a sum of the percentage of children experiencing each of the three parental factors. The average across Wales is therefore 102 (i.e. the sum of 37% with parental mental ill health; 29% subject to domestic abuse and 36% with parental substance misuse problems).

The 'trigger trio score' accounts for 24% ($R^2 = 0.24$) of the variance in the calculated 2018 rates of children looked after. The extent to which this can be linked to the prevalence of these issues within the local population and/or the way in which the local authorities respond to this need is unclear.

Summary of Findings: Parenting Capacity

Work by ADCS (2018) suggests that the impact of, and increases in, factors affecting parenting is seen by English local authorities as being one of the biggest challenges faced in the last two years, often resulting in highly complex work to redress the acts of omission in parenting. Notably they also highlight that domestic abuse – the most prevalent of the parenting factors reported in both Wales and England, is a prominent factor in the re-referral of children to children's social care services, whilst a high proportion of parents were reported to have poor mental health due to the cumulative impacts of poverty. It is anticipated that the situation in Wales is similar although the extent to which this is affecting

individual local authorities is difficult to gauge using the statistical sources utilised within this report.

Modelling the parental factors suggests that the proportion of the children looked after who are experiencing parental mental ill-health accounts for 25% of the variance in the local authority rates; while those subject to domestic abuse accounts for 21% of the variance. However, the fact that there are only 22 local authorities in Wales means that it is not possible to estimate the variation explained by more than one parental factor (or other factor).

The analysis presented in this section therefore seeks to ascertain the role that parental factors, and particularly the 'trigger trio' have in the rise in the number of children looked after in Wales using a crude measure (based upon adding together the proportions of children looked after with parental substance misuse, mental ill health and domestic abuse). **The resulting 'trigger trio score' accounts for around 24% of the variation in the local authority rates as at 31st March 2018.** It is anticipated that a more accurate assessment could be made using the individual level data since this would enable the measure to be refined. For example, it would be possible to determine the proportion of children receiving care and support, broken down by child status, in each local authority whose parent(s) experience one or more of the trigger trio. Alternatively, the proportion of children where all three parental factors were at the time of entry into care could be used.

Since the prevalence the various parenting factors is not known within the general population, it is difficult to estimate how many children may be at risk of harm or abuse. However, where it has been identified that a child has a care and support plan and hence receives care and support from social services, the odds of them being accommodated by the local authority rather than receiving that support whilst living in the family home are higher if the parent has learning disabilities or substance misuse issues (Table 12).

The differences seen in both the amount of variance explained by the respective parental factors and the odds ratios associated with the likelihood of a child being looked after rather than receiving support whilst remaining at home, is indicative of differences in practice and the risk associated with the presence of the respective factors. This is likely to be linked to the availability of provision to support families experiencing these difficulties within the local area and the budget that they have to provide appropriate, timely preventative services. Notably the Welsh Government (2018b) have announced additional funding to expand the services to support families and help reduce the need for children to enter care along with additional funds to tackle substance misuse (Welsh Government, 2018a). These represent new investment to expand preventative and early intervention services.

Whilst the emphasis here has been upon potential harm within the family setting, it is important to note that there has been an emergence of new terminology over the last two years, such as 'contextual safeguarding' as an approach to understanding, and responding to young people's experiences of significant harm beyond their families. This includes

exploitation by criminal gangs and organised crime groups such as county lines; trafficking; sexual exploitation and the influences of extremism leading to radicalisation (ADCS, 2018). The extent to which this is affecting children in Wales, and particularly at a local level is not yet understood.

Resources

Across both Wales and England, the increasingly high rates of children looked after is placing a significant strain on local authority resources at a time when they are also struggling with the implications of a prolonged period of austerity and the introduction of welfare reform. There are a number of reports which have sought to understand the causes of the variation in the demand between English local authorities which have a particular focus on resources which are pertinent to the Welsh context:

- *Making Sense: Understanding the drivers of variation in spend in Children's Services*, commissioned by the Local Government Association (Lum and Tregidgo, 2018)
- *Public spending on children in England: 2000 to 2020*, produced by the Institute for Fiscal Studies for the Office of the Children's Commissioner (Kelly et al., 2018)
- National Audit Office (2019) also considers the *Pressure on children's social care* demand and activity and the responses being made nationally and within local authorities in their report.

Within Wales, the WLGA and ADSS Cymru (2018) have identified four key areas where significant pressures are being experienced in relation to children's services in Wales:

1. **External demands and complexities:** The on-going introduction of welfare reforms and a decade of austerity has amplified the pressures on families. Increased public awareness and reporting of potential abuse, the impact of poverty and deprivation on families and a lack of funding to help families early on before problems escalate all contribute to this. There is an increased awareness and understanding of issues such as Child Sexual Exploitation (CSE) and an increase in the number of initiatives that are aimed at early identification and intervention such as the evidence based work in respect of Adverse Childhood Experiences (ACEs), Flying Start and Families First.
2. **Placements:** The increasing complexity of cases and the growing numbers of children coming into care are negatively impacting on both the availability of appropriate placements and the cost of placements. An ageing foster carer population and the increasing costs of providing residential care has a significant impact on the sector.
3. **Legislation and work with the Courts:** The last few years have seen a substantial increase in the number of care applications that have been made, with a significant

increase in the number of children subject to care proceedings. Increasing expectations from legal judgements create a challenging environment.

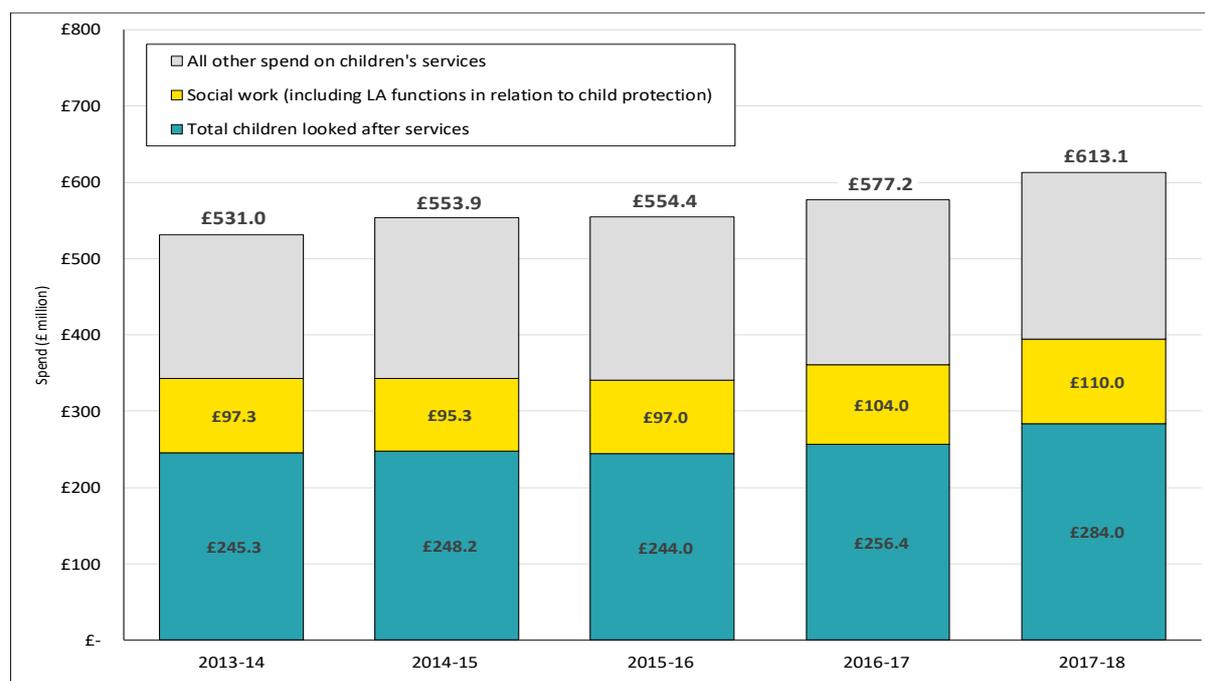
4. **Workforce:** Child and family social work is challenged by high turnover and vacancy rates and a reliance on agency staff, with demand for permanent, experienced workers outstripping supply.

Whilst the previous section focused primarily on the presenting analysis relating to demand side issues, this section considers the level and distribution of expenditure available to respond to this demand. As such it draws upon the reports referenced above to contextualise the situation in Wales where possible, and to summarise trends in the variation between local authority spend specifically on children looked after.

Trends in Spend

In 2017-18, the total spend on children and families' services³¹ across Wales was £613.1 million. Compared to 2013-14, the total net expenditure on children and families' services has increased by 15.5% - equivalent to an additional £82.1 million. During the same period, spend on children looked after services has increased by 15.8% (an increase of £38.7 million) whilst expenditure on social work including child protection functions has increased by 13.1% (an increase of £12.7 million).

Figure 27: Total Spend on Children and Families' Services with Spend on Children Looked After Services and Social Work (£ million)

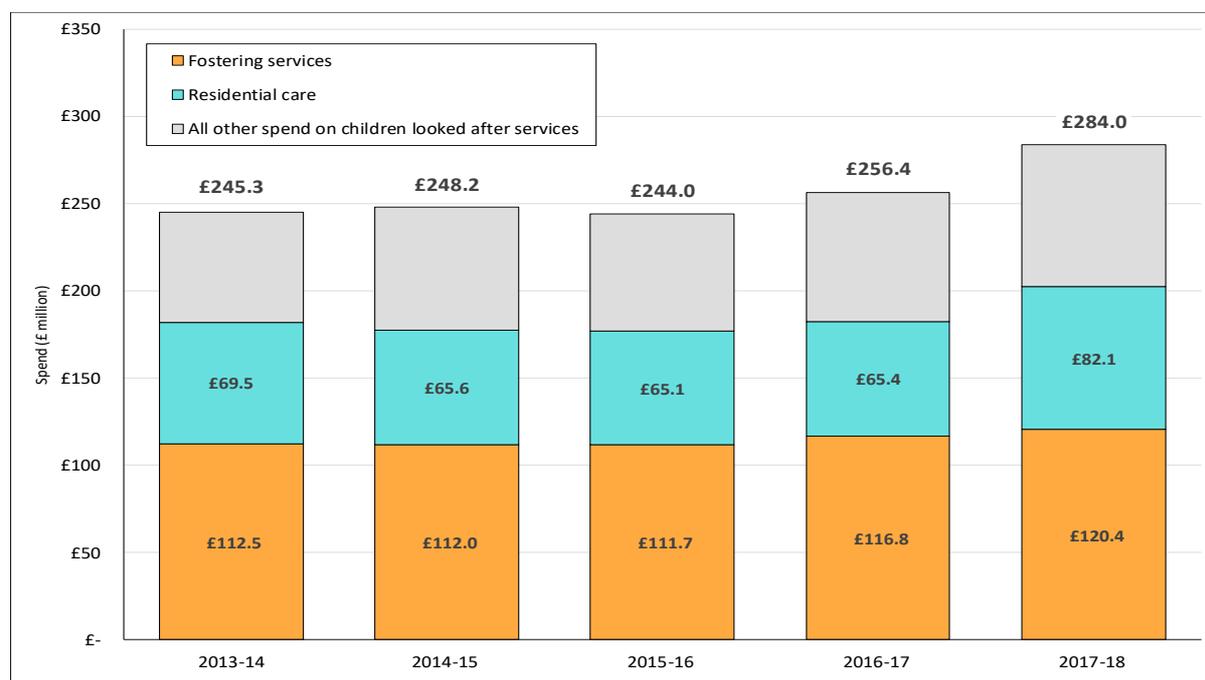


Source: Total net current expenditure on children and families' services, 2017-18 is based on the RO Collection Stats Wales (2018h).

³¹ This includes spend on the following services: Children's Centres / Flying Start and early years; looked after children; other children's and family services, youth justice, safeguarding children and young people's services, asylum seekers, and services for young people. The latest data available relates to expenditure in 2017-18.

The most significant costs within children looked after services are fostering services and residential care, followed by leaving care support services. Notably in 2017-18, spend on fostering services was equivalent to 42.4% of the total spend on children looked after (£120.4 million out of £631.1 million). This was equivalent to 19.6% of the total children’s and families’ services spend. Whilst spend on residential care was lower at £82.1 million, this was still equivalent to 28.9% of all spend on children looked after (13.4% of the total children’s and families’ services spend).

Figure 28: Total Spend on Children Looked After Services with Spend on Fostering Services and Residential Care (£ million)



Source: Total net current expenditure on children and families’ services, 2017-18 is based on the RO Collection Stats Wales (2018h).

The increased spend on children looked after services between 2013-14 and 2017-18 has not been uniformly distributed across the service. Proportionally, it is the increasing spend on residential care which has contributed the most to the overall net increase in spend on children looked after during the last 5 years, with spend increasing from £69.5 million in 2013-14 to £82.1 million in 2017-18. This is equivalent to an additional spend of £12.6 million. Although the actual spend on fostering services represents a larger proportion of the total spend on children looked after, the increased spend (an extra £7.9 million relative to 2013-14) represents a smaller proportion of the net increase than residential care. The other areas of spend which have also contributed significantly to the net increase in spend on children looked after are special guardianship support (spend increased from £6.6 million to £12.8 million), and other services for looked after children (from £11.4 million to £17.3 million).

Table 13: Change in Children and Families' Services Spend, by Local Authority (2013-14 to 2017-18) (£ million)

	Total children's and families' services			Total children looked after services			Fostering Services			Residential Care		
	2013-14	2017-18	% change	2013-14	2017-18	% change	2013-14	2017-18	% change	2013-14	2017-18	% change
Isle of Anglesey	7.5	13.4	77.7	4.0	6.1	50.5	1.5	2.9	89.4	1.9	2.6	40.7
Gwynedd	18.9	21.0	10.8	8.5	7.8	-7.4	3.5	3.6	4.3	2.8	2.3	-17.8
Conwy	14.2	15.4	9.0	5.5	7.3	33.7	2.7	3.9	43.1	1.5	1.9	23.7
Denbighshire	11.9	14.2	19.0	4.0	5.3	34.1	2.8	2.7	-3.1	0.4	1.6	294.7
Flintshire	19.9	23.7	18.9	8.6	10.2	18.6	4.4	2.8	-36.8	2.1	5.3	150.8
Wrexham	21.0	25.3	20.4	7.8	9.1	16.4	2.7	2.4	-13.0	3.6	3.9	9.3
Powys	18.6	24.6	32.2	8.3	10.5	26.9	4.3	3.5	-18.2	2.0	5.0	149.6
Ceredigion	9.8	10.5	6.8	4.4	3.5	-19.0	1.9	1.7	-10.7	0.7	0.2	-76.3
Pembrokeshire	15.6	17.0	8.8	5.5	5.5	-0.3	2.4	2.3	-4.9	1.1	0.7	-34.3
Carmarthenshire	23.8	27.4	14.8	7.7	8.5	9.9	3.2	3.4	6.4	1.9	2.4	24.8
Swansea	53.9	50.4	-6.5	27.4	25.0	-8.6	8.4	8.9	6.3	12.0	8.4	-29.8
Neath Port Talbot	36.1	33.0	-8.6	17.2	14.0	-18.5	10.7	8.8	-17.3	3.2	2.4	-26.2
Bridgend	28.8	29.2	1.5	14.8	14.6	-1.8	9.7	8.5	-12.1	3.0	3.6	19.0
Vale of Glamorgan	18.2	20.9	14.7	9.7	10.6	9.3	3.0	3.7	23.2	3.9	2.5	-35.5
Cardiff	62.9	74.6	18.6	34.9	44.0	26.2	15.5	20.9	34.7	11.5	10.5	-8.1
Rhondda Cynon Taf	55.4	60.3	8.8	26.2	28.4	8.2	12.5	12.6	1.2	8.4	8.9	6.4
Merthyr Tydfil	14.8	16.0	8.5	6.9	7.2	4.5	4.4	3.8	-14.9	0.6	1.2	120.6
Caerphilly	29.1	37.1	27.7	11.2	18.5	64.4	6.6	6.5	-1.7	1.4	4.8	231.8
Blaenau Gwent	14.0	16.4	38.1	6.2	10.0	60.1	3.7	5.0	38.1	0.6	3.0	367.5
Torfaen	16.5	23.9	45.0	9.1	12.6	38.7	1.4	4.0	195.4	3.5	2.9	-15.5
Monmouthshire	10.5	15.6	48.0	4.5	7.8	73.2	2.3	3.3	42.6	0.5	1.8	259.4
Newport	29.5	40.3	36.7	13.1	17.7	35.2	5.2	5.3	3.5	2.8	6.1	119.5
Wales	531.0	613.1	15.5	245.3	284.0	15.8	112.5	120.4	7.0	69.5	82.1	18.2

Source: Total net current expenditure on children and families' services, 2017-18 is based on the RO Collection Stats Wales (2018h).

Geographically the distribution has also not been uniform. In terms of overall spend on children's and families' services, only two local authorities saw a decrease between 2013-14 and 2017-18: Swansea's spend fell by 6.5% whereas Neath Port Talbot saw a decrease of 8.6% (Table 12). The remaining authorities have all seen an increase, with spend in Isle of Anglesey seeing the greatest increase (77.7%), whilst Torfaen and Monmouthshire have seen their spend increase by 45% and 48% respectively.

Six authorities - Ceredigion, Neath Port Talbot, Gwynedd, Pembrokeshire, Swansea and Bridgend - saw reductions in their total spend on children looked after. Of these, Ceredigion, Neath Port Talbot and Pembrokeshire reduced their spend on both residential care and fostering services. Monmouthshire saw the greatest increase in spend on children looked after services (+73.2%), with their spend on residential care increasing by 259%. Caerphilly and Blaenau Gwent saw their spend on children looked after services increase by 64.4% and 60.1% respectively, with both again experiencing significant increases in their spend on residential care. Across the remaining local authorities, many have also been significant increases in the amount committed to residential care and/or fostering services.

Spend on placements was considered as part of the Public Accounts Committee Inquiry (2018) who highlighted that classification changes can distort the picture over time. Work undertaken by the National Audit Office (2019) asserts that, certainly in England, whilst there is significant variation between the different local authorities in terms of both 'safeguarding rates' and the cost of their services, there is no link between spending per child in need and the quality of these services. However, this is disputed by Bywaters and Webb (2018) based on their analysis of Ofsted judgements in the 40% most deprived English local authorities relative to those in the 40% least deprived. They make the case that low-deprivation local authorities spend less because they face lower levels of need, and the funding formula recognises this. It is therefore necessary to look at the level of spend relative to the demands that local authorities face, arguing that their analysis suggests that the extra spend in deprived local authorities is now insufficient. Notably they point to the way in which cash-strapped local authorities have responded to austerity since 2010 with significant cuts being made to family support and early help services whilst expenditure on looked-after children and safeguarding services has risen.

Equivalent analysis around the quality of services has not been undertaken in Wales. However, the WLGA and ADSS Cymru (2018) have determined that after adjusting for inflation, local authority's core grant funding has reduced by 22% since 2010 (if you take schools out, core funding has fallen by 35%). This squeeze on local authority funding is seen by the WLGA and ADSS Cymru as having a detrimental impact on the provision of preventative services with what limited money local authorities have available to them increasingly being taken up with the provision of urgent help for children and families already at crisis point. This has left little to invest in early intervention.

The relationship between the cost of providing services for children looked after and deprivation

The 2017-18, the total spend on children and families' services was equivalent to £975.88 per child³² resident in Wales – an increase of £133.26 per 0-17 year old compared to 2013-14. Work commissioned by the Local Government Association based on data for English local authorities identified five drivers of variation in the spend per head for children's social services, with the Income Deprivation Affecting Children Index (IDACI) measure of deprivation being found to be the single most significant factor. When modelled alongside the other four factors (size of population 0-25, amount of disposable household income, levels of unemployment and levels of crime), the resulting model was found to describe just over 50% of the spend variation. Equivalent modelling is not possible within Wales due to the small number of local authorities. However, Table 13 summarises the drivers in variation and the results of exploring these relationships in Wales.

Given the identified relationship between deprivation and spend per head in England, this relationship has also been explored to determine if there are also higher levels of spend in those authorities with higher levels of deprivation. In the absence of a local authority extent measure as there is in England, the proportion of LSOAs in the local authority which have an overall rank in the 20% most deprived nationally has been used³³. Using this measure suggests that **just under 60% of the variation in local authority total children and families' services spend per head is explained by deprivation** (Figure 29). This has implications for policy and practice since analysis by the Centre for Cities (2019) has found that it is the poorest who have borne the brunt of council spending cuts and there are city and country divides in terms of overall expenditure on services.

³² This approach was undertaken by Lum R and Tregidgo L. (2018) Making sense understanding the drivers of variation in spend on children's services. London: Local Government Association. However, they opted to use the 0-25 population as a denominator. Whilst the total spend on Children and Families' Services reported as part of the revenue outturn collection on Stats Wales captures expenditure for leaving care support services and other services which may extend beyond the 18th birthday, it was felt that using the 0-17 population would be a more appropriate measure since a number of Welsh authorities have a significant student population. This age range is in keeping with the definition of children used by the Social Services and Well-being Act, 2014.

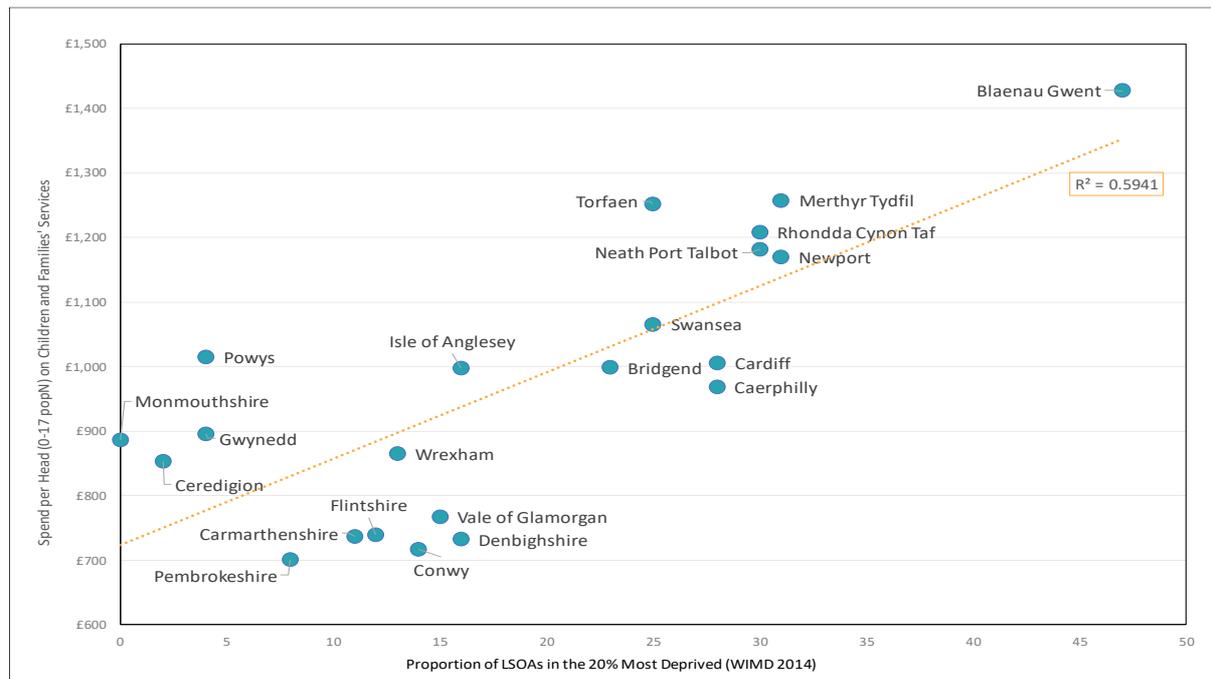
³³ For completeness, the relationship has been considered using the thresholds of the top 10%, 20% and 30% to determine the amount of variation that they explain in relation to total spend of children and families' services per head in Wales. In each instance analysis suggests that those local authorities with the higher levels of deprivation typically have a higher spend per head.

Table 14: Drivers of Variation in Local Authority Spend on Children and Families' Services

Factor	Direction of Correlation (England)	Dataset used in the LGA Report (England)	Welsh Findings	
Deprivation	Higher levels of deprivation are linked to higher spend	IMD Dataset: IDACI – Average Score	An equivalent measure is not determined in Wales	? – no data
Size of population aged 0-25	Larger 0-25 populations are linked to lower spend	Predicted populations from the Office of National Statistics (ONS)	There is no evidence of a linear relationship between the size of either the local population aged 0-25 or the 0-17 and the appropriate measure of spend per head	✘ - no evidence the relationship exists
Disposable household income	Higher disposal income is linked to higher spend	Gross Disposable Household Income (GDHI) from the ONS. Per person resident	In Wales, spend per child decreases as the average household disposable income increases. This is contrary to the trend reported by Bywaters et al (2016a)	✘ - reverse looks to be the case
Levels of unemployment	High unemployment is linked to higher spend	IMD Dataset: Employment Average Score	Annual updates are available for this indicator within WIMD. Using these suggests that there is a higher spend in local authorities where there is a higher proportion of working age residents in receipt of unemployment related benefits	✓ - same relationship
Levels of crime	Higher levels of crime is linked to higher spend	IMD Dataset: Crime – proportion of LSOAs in the lowest 10% crime rate nationally	The equivalent domain in WIMD 2014 is constructed using different indicators. However, higher levels of crime are linked to higher spend in Wales	✓ - same relationship

Adapted from Lum and Tregidgo (2018)

Figure 29: Spend per Head on Children and Families' Services compared to the WIMD 2014



Source: Total net current expenditure on children and families' services, 2017-18 is based on the RO Collection Stats Wales (2018h). The proportion of LSOAs ranked in the Top 20% most deprived is based upon WIMD 2014 (Stats Wales, 2018i).

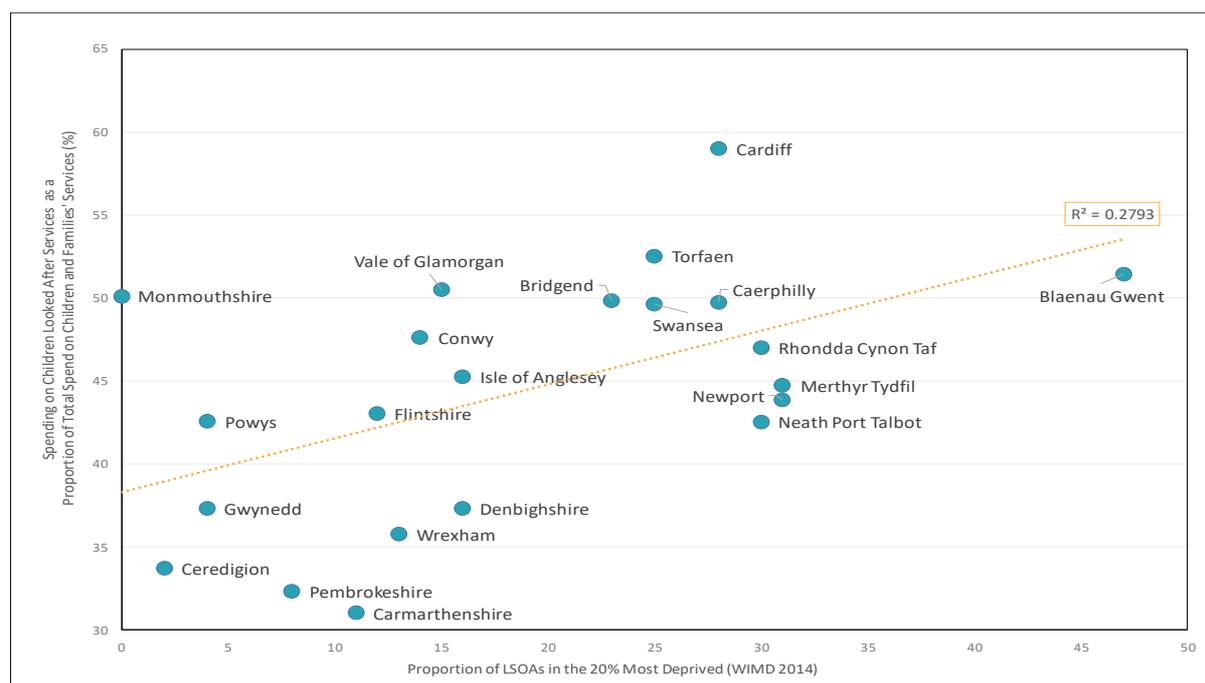
It is notable that the rural authorities tend to have lower levels of deprivation than urban areas. As can be seen from Figure 29, they tend to have a low proportion of LSOAs in the 20% most deprived and a comparatively low spend per head. The exception to this is Powys where potentially the high level of rurality has a cost implication for service delivery.

Whilst deprivation explains a significant proportion of the variation in local authorities' total spend on children and families' services, it is anticipated that in addition to the demographic and economic factors identified above, differences in local policy and practice contribute to and necessitate differences in the proportion spend on children looked after and on the child protection register.

As highlighted, 46.3% of the total spend on children and families' services was on children looked after services in 2017-18. However, this proportion ranged from 31% in Carmarthenshire to 59% in Cardiff. As can be seen from Figure 30, those local authorities which have higher levels of deprivation also tend to have committed a higher proportion of their overall children and families' services expenditure to children looked after services. However, **less of the variation in the proportion of local authority children and families' services expenditure committed to children looked after services can be explained by deprivation ($R^2 = 0.28$ i.e. 28%)**. When combined with the finding that 59% of the variation in local authority children and families' services expenditure can be explained

by deprivation, this could be indicative of there being differences in the way in which local authorities are responding to demand in light of limited resources.

Figure 30: Spending on Children Looked After Services as a Proportion of Total Spend on Children and Families' Services compared to the WIMD 2014



Source: Total net current expenditure on children and families' services and the total spend on children looked after services, 2017-18 taken from the RO Collection Stats Wales (2018h). The proportion of LSOAs ranked in the Top 20% most deprived is based upon WIMD 2014 (Stats Wales, 2018i).

To fully understand variation in the local authority expenditure on children looked after, it would be necessary to determine the spend on children looked after services per child looked after. This figure is likely to be higher than that based upon total children and families' services expenditure divided by the total number of children. However, having only data from a snapshot rather than from across the year, means that this cannot be determined in Wales. In calculating such a figure, it would also be necessary to take into account the duration for which the child was looked after, since this will vary considerably.

Given the significant links to other services (e.g. education; early intervention and preventative work within adult social service/health; and policing) a true assessment of the cost of providing edge of care services and supporting children looked after would also need to take into account all relevant financial resources.

Summary of Findings: Resources

In the last 5 years, the total spend on children and families' services in Wales has increased by 15.5% and in 2017-18 stood at £613.1 million. Of this 46.3% is spent on children looked after services (£284 million). Within Wales the proportion of children and families' services spend which is allocated to children looked after services varies considerably, with those local authorities which have higher levels of deprivation also tending to have a higher spend per head both in terms of total spend on children and families' services and the spend specifically on children looked after services.

A number of drivers for the increased children's social services spend in England have been put forward. Although, it is not possible to model all of these using the data available in Wales, it would appear that the extent of deprivation within a local authority accounts for around 60% of the variation in overall spend. However, deprivation only explains around 28% of the variation in the proportion of the children and families' services spend committed to children looked after services.

Spend on placements represents a significant proportion of the spend on children looked after. Of the £284 million spent on children looked after services in 2017-18, 42% was spent on fostering services (an increase of 7% over the last 5 years across Wales) whilst 29% (£82.1 million) was spent on residential care. Notably, the amount spent on residential care has increased by 18.2% since 2013-14. These increased costs reflect the increasing complexity of the cases and the growing numbers of children coming into care along with the impact of an aging foster carer population and the rising costs of providing residential care.

Recommendations for Further Analysis

This report has been produced to stimulate debate about the factors that contribute to the high rates of care in Wales and potential reasons for the variation in the rates of children looked after. The extent to which this can be achieved using publicly available data is however limited – something which there is the potential to address by looking at the underlying data from the LAC Census and the CRCS Census.

Whilst the PLATO data enables differences to be quantified in terms of the rates of applications for and resulting care orders, the most recent data relates to 2016. As a result, it does not reflect the legislative changes brought about by the 2014 Act, nor does it reflect more recent practice changes following the increased scrutiny of the use of section 76 (in Wales) and section 20 (in England) arrangements. However, from the data that is available, it is apparent that Wales not only has a higher rate of applications for care orders and also a higher conversion rate into resulting orders. The reasons behind this are not clear and are worthy of further investigation.

In looking to understand why there are differences within Wales, and to understand the extent to which these can be attributed to variations in policy and practice linked to the trigger trio, this could be done more robustly through use of the individual level data. Similarly, there is the potential to investigate the role of deprivation by considering using the postcode of the child's address prior to their current period of care – this would advance the work undertaken as part of the Child Welfare Inequalities Project and build upon the doctoral research undertaken by Martin Elliott. Such analysis would provide a more refined picture of why there is local authority level variation in the rates of children looked after. However, to understand the various ways in which demand, supply and budget interact with policy and practice, a more nuanced approach is required. The analysis undertaken looking at the differences in the respective proportions within the safeguarding cohort suggest that there may be differences in the thresholds for starting to work with a family/child, and potentially for taking a child into care. The relationship with deprivation is unclear. However, local resources and levels of demand will have an impact on the priorities and ability of local authorities to provide preventative and edge of care services.

Having access to snapshot data, albeit for successive years limits the amount of analysis that can be undertaken in relation to spend on children looked after. Whilst attempts have been made to look at spend per head of the local child population, it is not possible to determine a figure for the spend per looked after child. Even if an average were to be produced, it would not take into account the complexities of each individual child's situation or the nature of the support that they may need. Factors such as the type and duration of the

placement would also need to be taken into account as would the nature of their needs, adding to the complexity of such an exercise.

It is hoped that the analysis presented in this paper will inform discussions with local authorities, the judiciary and practitioners which will enable the potential contributory factors to be explored.

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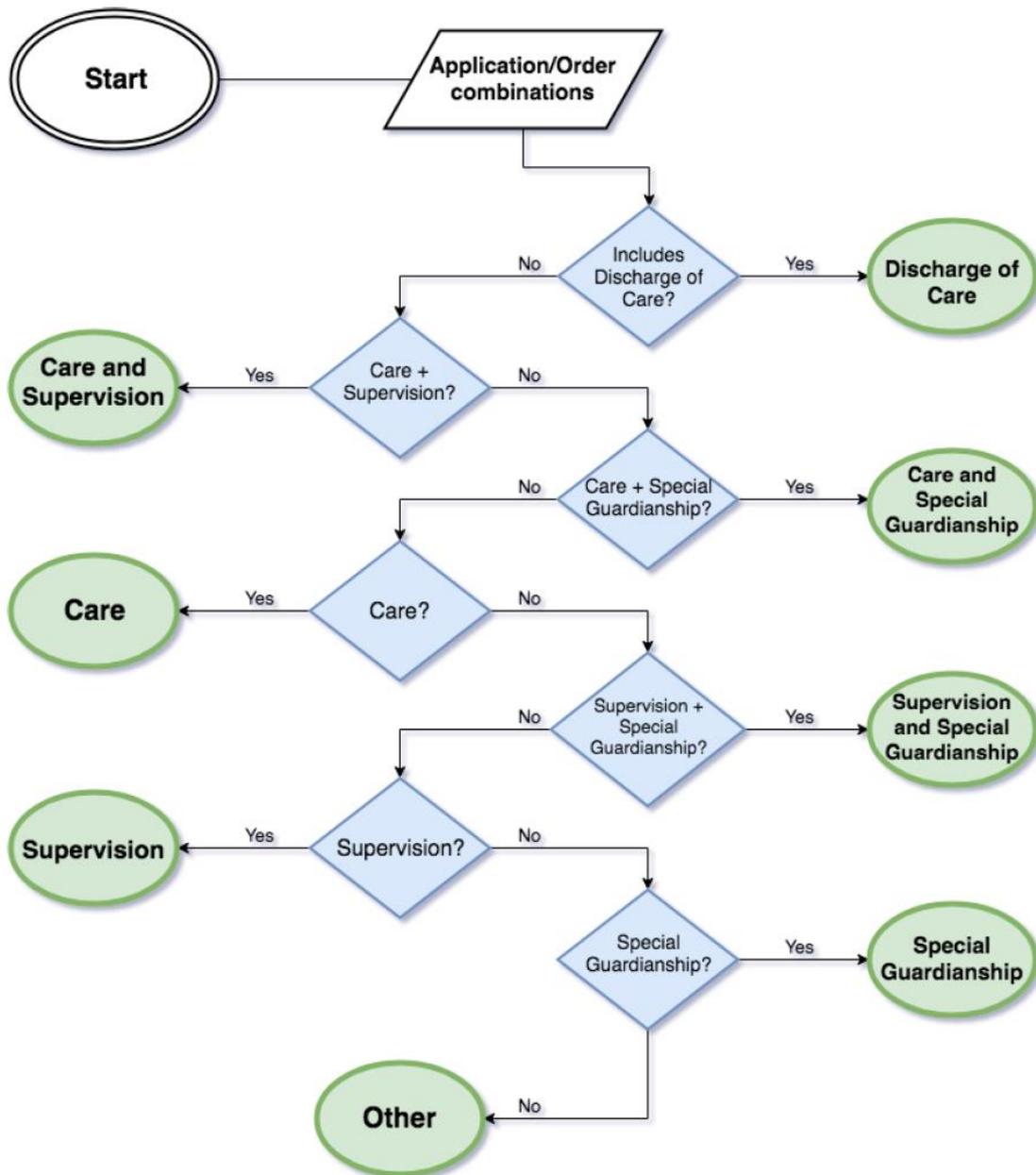
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Appendix 1

PLATO Data

Figure A1: Flow chart illustrating the grouping of application and order categories



Source: Ministry of Justice (2018)

For ease these have been further grouped into overlapping groups within this report:

Table A1: Groupings used within this report for applications and orders

Description	Group
Care order	
Care + supervision	Care
Care + special guardianship	
Supervision order	
Care + supervision	Supervision
Supervision + special guardianship	
Special guardianship	
Care + special guardianship	Special guardianship
Supervision + special guardianship	
Discharge of care	Discharge of care
Other	Other

Appendix 2

Linear Regression

Linear regression is a basic and commonly used type of predictive analysis which uses a linear relationship to predict the (average) numerical value of Y [such as the local authority rate of children looked after] for a given value of X [an explanatory variable such as the proportion of children looked after experiencing a named parental factor] using a straight line.

The simplest form of the regression equation with one dependent and one independent variable is defined by the formula $Y = \text{Intercept} + \text{Slope} * X$. Hence, the rate Y can be estimated from the *slope* of the regression line and the point where the regression line crosses the y -axis (*the intercept*) for a given value of X . Table A.2 summarises the results of the linear regression models based on the various parental factors.

Table A2: Modelling the Relationship Between the Presence of Parental Factors and the Local Authority Rates of Children Looked After, 31st March 2018

Parental Factor	Intercept on y-axis	Coefficient (Slope)	P-value	R-squared
Parental mental ill health	51.46	1.26	0.017	0.25
Subject to domestic abuse	66.68	1.07	0.030	0.21
Parental substance or alcohol misuse	60.24	1.01	0.109	0.12
Parental learning difficulties	110.75	-1.08	0.503	0.02
Parental physical ill health	95.60	0.30	0.825	0.00
Trigger Trio Score	49.80	0.47	0.019	0.24

Source: Children Receiving Care and Support Census where the child's status is children looked after on 31st March has been used to determine the rate per 10,000 (Stats Wales, 2019d) along with the 2017 mid-year population estimates (Office for National Statistics, 2018a). Parental factors taken from Stats Wales (2019g).

The direction of the slope provides an indication of the nature of the relationship. For example, the negative coefficient for parental learning difficulties suggests that for every addition percentage point increase in the proportion of children looked after, the rate is anticipated to decrease by 1.08. Conversely, the positive coefficients for the other parental factors suggest that for every additional percentage point increase in the proportion of children experiencing the named parental factor, the expected rate is expected to increase by the value of the coefficient.

In the case of parental mental ill health and being subject to domestic abuse, we can be relatively confident in the calculated rate since the p-value are less than 0.05. However, for the other parental measures, the resulting p-value is greater than 0.05, suggesting that the predictor variables are not statistically significant.

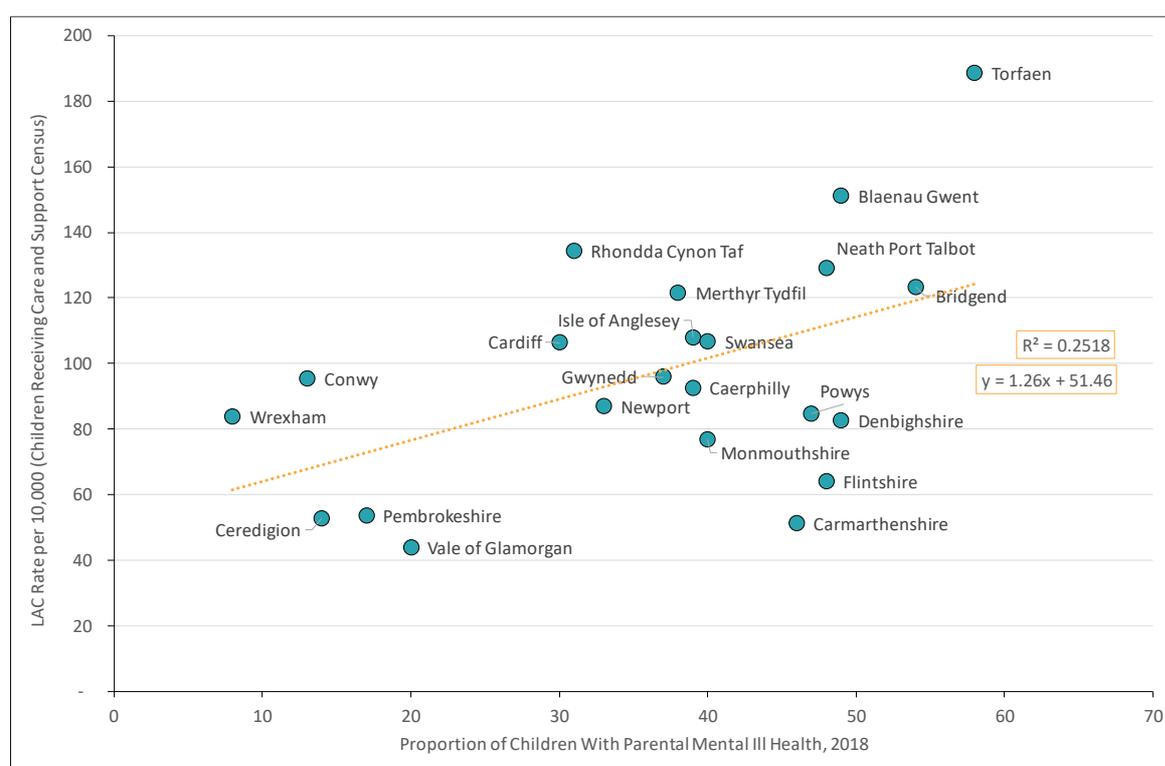
Linear regression models have been used to calculate the expected predicted rate of children looked after in a given local authority where the proportion of children with a named parental factor is known. For example, if 50% of children looked after were identified as having one or more parent experiencing mental ill health, the anticipated rate of children looked after would be:

$$\text{Intercept on the y-axis} + (\text{Slope} * \text{Proportion with Parental Factor}) = \text{Rate}$$

$$\text{i.e. } 51.53 + (1.26 * 50) = 114 \text{ per } 10,000$$

The predicted rate can also be read off the chart (Figure A2).

Figure A2: The Relationship Between the Proportion of Children with Parental Mental Ill Health and the Local Authority Rates of Children Looked After, 31st March 2018

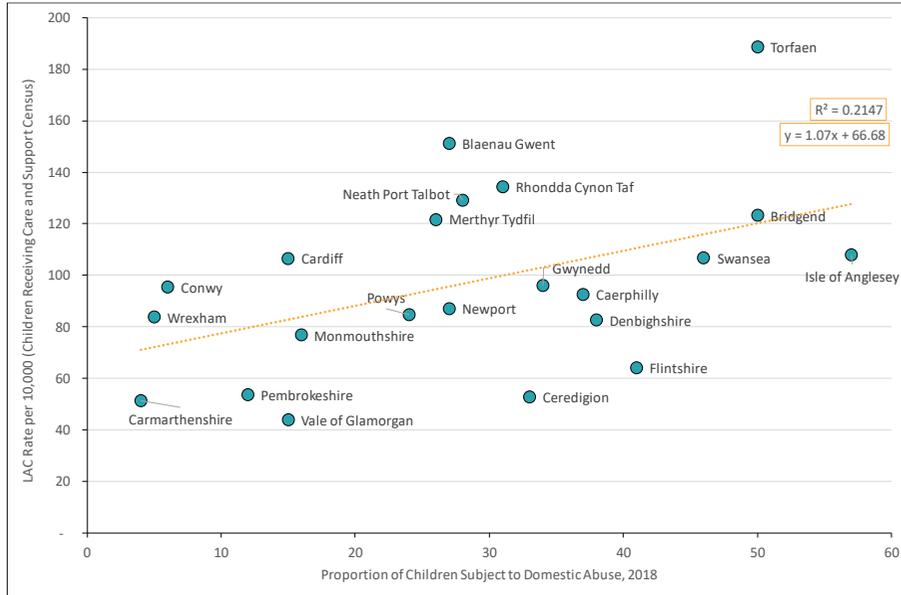


Source: Children Receiving Care and Support Census where the child's status is children looked after on 31st March has been used to determine the rate per 10,000 (Stats Wales, 2019d) along with the 2017 mid-year population estimates (Office for National Statistics, 2018a). Parental factors taken from Stats Wales (2019g).

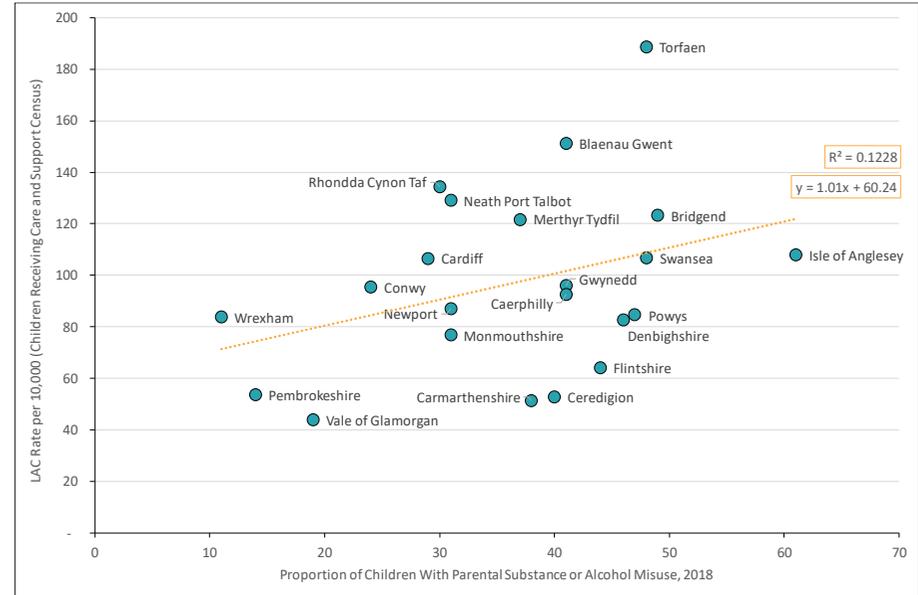
Since the p-value for the coefficient is less than 0.05, we can be 95% confident that this figure was not arrived at by chance. The R² value provides a measure of the amount of variance explained by this predictor.

Figure A3: The Relationship Between the Proportion with the Named Parental Factor and the Local Authority Rates of Children Looked After, 31st March 2018

(a) Subject to Domestic Abuse

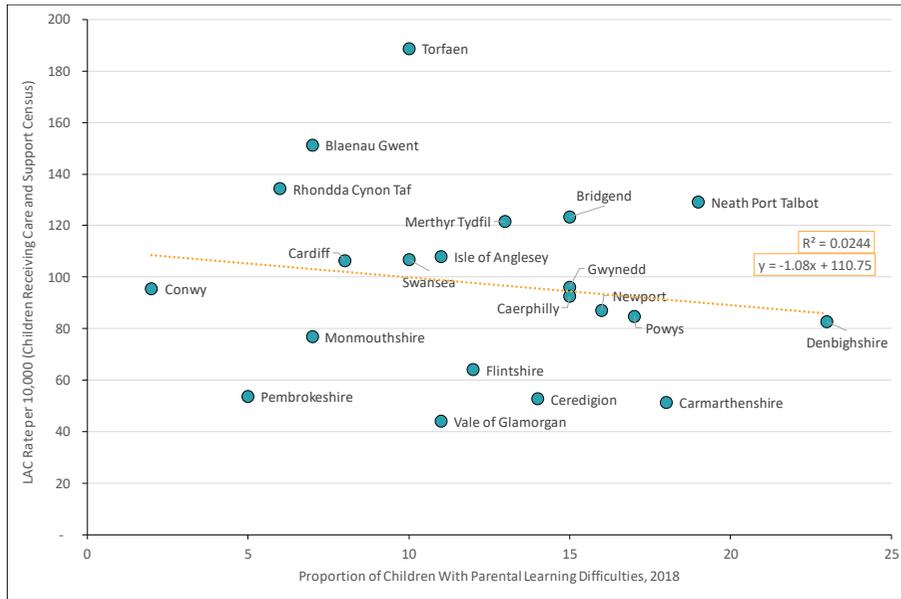


(b) Parental Substance or Alcohol Misuse

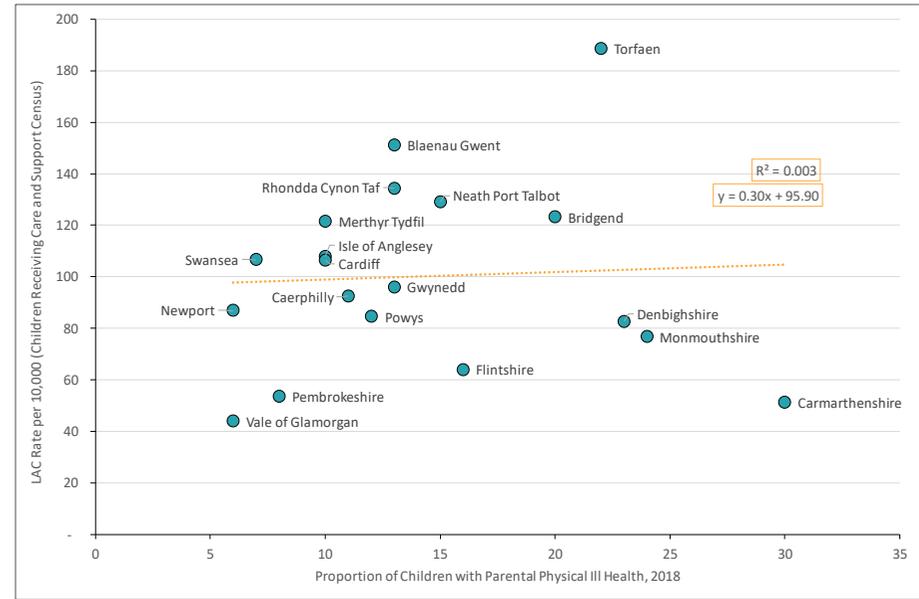


Source: Children Receiving Care and Support Census where the child's status is children looked after on 31st March has been used to determine the rate per 10,000 (Stats Wales, 2019d) along with the 2017 mid-year population estimates (Office for National Statistics, 2018a). Parental factors taken from Stats Wales (2019g).

(c) Parental Learning Difficulties



(d) Parental Physical Ill Health



Source: Children Receiving Care and Support Census where the child's status is children looked after on 31st March has been used to determine the rate per 10,000 (Stats Wales, 2019d) along with the 2017 mid-year population estimates (Office for National Statistics, 2018a). Parental factors taken from Stats Wales (2019g).
 Notes: The proportion of children with parental learning difficulties is suppressed for Wrexham. The proportion of children with parental physical ill health is suppressed for Wrexham, Conwy and Ceredigion.

Calculating the 'Trigger Trio Score'

The Trigger Trio score is a crude measure based on summing together the proportion of children looked after experiencing:

- Domestic violence and abuse within the household
- Parental substance misuse (alcohol or drugs)
- Parental mental health issues

This gives a score out of 300. For example, Wales has a Trigger Trio Score of 102 (i.e. the sum of 37% with parental mental ill health; 29% subject to domestic abuse and 36% with parental substance misuse problems).

When compared with the calculated rate of children looked after, the 'trigger trio score' accounts for 24% ($R^2 = 0.24$) of the variance in the rates is accounted for by this indicator, with the p-value of 0.026 suggesting that we can be relatively confident in the predicted rate of children looked after. Both this and the regression model involving parental mental ill health appear to be the 'best' predictors of local authority level rates. However, it is notable that both are less accurate at predicting the rate in Torfaen. This is in part because the calculated rate in Torfaen (based on the CRCS Census) is much higher than that in the other Welsh authorities.

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