



HOUSE OF LORDS

Public Services Committee

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3rd Report of Session 2022–23

**A response to  
the Children’s  
Social Care  
Implementation  
Strategy**

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### *Committee staff*

The staff who worked on this inquiry were Sam Kenny (Clerk), Tom Burke (Policy Analyst) and Claire Coast-Smith (Committee Operations Officer).

### *Contact details*

All correspondence should be addressed to the Public Services Committee, Committee Office, House of Lords, London SW1A 0PW. Telephone 020 7219 6154. Email [hlpublicservices@parliament.uk](mailto:hlpublicservices@parliament.uk)

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Q in footnotes refers to a question in oral evidence.

## SUMMARY

The Government's Strategy to reform children's social care—'Stable Homes, Built on Love'—needs to deliver fundamental change to the care system. While there is much to commend in the strategy because in many key areas the direction is right, nevertheless it fails to deliver the radical reset that is needed. It lacks scale, ambition, and pace and for several years will have an impact in only a few areas, and then only as a pilot programme. It therefore does little for the majority of young people, families, and staff in children's social care in the short-term; and there is no guarantee of long-term reform.

The *Strategy* lacks the political buy-in, and the funding needed to deliver reforms for children and families. It also makes little mention of how to improve residential care. We explore these high-level issues in Chapter 1.

Young people need a voice in decisions about their care. They need to be listened to when systems which will affect their lives are designed and reformed. Too often, young people have not been heard. The services designed to advocate for them are ineffective and lack independence. We explore the Government's attempts to make this happen in Chapter 2. The *Strategy* takes some positive steps to address this, but advocates (whose job it is to hold local authorities to account on behalf of young people) must be able to hold local authorities to account. True independence is critical.

The overarching ambition is for more children to be in safe, loving homes. We welcome the focus on early intervention in the form of Family Help, in Chapter 3.

What we do not see is pace or ambition. The *Strategy* proposes to trial programmes even though many of them already have a good evidence base and could be rolled out across the country now. For at least the next two years, most young people will see no difference. Ambitious targets for recruiting foster carers are needed, but there are no numbers attached to the Government's plans. Greater financial support for kinship carers depends on another strategy later this year—little comfort for families caring for their kin now.

Chapter 4 covers the workforce. The people on the ground are vital to any strategy. Without addressing shortages and high turnover for staff, no amount of strategic thinking will make the situation better for young people. Once again, the scale of the *Strategy* falls short. The aim—to boost the workforce though 500 apprenticeships—will not address the almost 8000-person shortfall seen in the children's care system.

We welcome the Government's plans to increase training and support and to cut red tape, allowing staff more time with families instead of working on administrative tasks. At scale, these changes could significantly address retention issues and improve the quality of services. However, the Government is not moving at the pace needed: it is introducing changes in only a small number of places, or it is "exploring" potential future actions. This offers little for staff on the ground now.

Chapter 5 focuses on ensuring there are enough care placements. The Government's plan is to pool the resources and expertise of local authorities into regional cooperatives which will lead planning and commissioning. Whilst there was a cautious welcome from some in the sector, witnesses from local

authorities told us this approach would neither boost the number of care placements, nor help local government effectively manage the care market—a sound case has not yet been made for the Government's plan.

The children's care system is in crisis. The Government's plan has much to recommend it and could be a golden opportunity for much needed change. But unless the proposals go further and faster, the opportunity will be thrown away. Sadly, the *Strategy* will still leave many children behind. While we accept that not every reform can be introduced everywhere immediately, we need to ensure that all children and families engaged in the care system see some immediate benefit and can be sure that significant change will follow.

# A response to the Children’s Social Care Implementation Strategy

## CHAPTER 1: INTRODUCTION

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### Background

1. In February 2023 the Department for Education published *Stable Homes, Built on Love: Implementation Strategy and Consultation—Children’s Social Care Reform 2023* (hereafter, ‘the Strategy’).<sup>1</sup> The Strategy responds to several reviews examining children’s social care, most importantly the Independent Review of Children’s Social Care 2022 (‘the Independent Review’), which called for a “radical reset” of the children’s social care system.<sup>2</sup> It also responds to the 2022 Competition and Markets Authority’s Children’s Social Care market study,<sup>3</sup> and the 2022 Child Safeguarding Practice Review Panel review into the deaths of Star Hobson and Arthur Labinjo-Hughes 2022.<sup>4</sup>
2. The Public Services Committee’s second inquiry was into the role of public services in overcoming child vulnerability. In 2021 we published *Children in crisis: the role of public services in overcoming child vulnerability*.<sup>5</sup>
3. This inquiry, which we launched on 15 March, is a review of the Strategy. We identify areas of strength and weakness within it.

### The Strategy

4. The Strategy is both a consultation and a plan. It commits £200 million of additional investment in children’s social care until 2024/25.<sup>6</sup> A number of national interventions are set out (see Box 1). It contains suggested actions and asks for contributions and views, and commits to a series of further consultations.

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- 1 Department for Education, *Stable Homes, Built on Love: Implementation Strategy and Consultation - Children’s Social Care Reform 2023*, (February 2023): [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1147317/Children\\_s\\_social\\_care\\_stable\\_homes\\_consultation\\_February\\_2023.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1147317/Children_s_social_care_stable_homes_consultation_February_2023.pdf) [accessed 23 April 2023]. Hereafter referred to in the report text as ‘the Strategy’ and in the footnotes as ‘*Stable Homes, Built on Love: Implementation Strategy and Consultation - Children’s Social Care Reform*’.
  - 2 The Independent Review of Children’s Social Care, *The Independent review of children’s social care: final report*, (May 2022): [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1141532/Independent\\_review\\_of\\_children\\_s\\_social\\_care\\_-\\_Final\\_report.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1141532/Independent_review_of_children_s_social_care_-_Final_report.pdf) [accessed 24 April 2023]. Hereafter referred to in the report text and in the footnotes as ‘The independent review of children’s social care’.
  - 3 Competition and Markets Authority (CMA), *Children’s social care market study and report*, (10 March 2022): <https://www.gov.uk/government/publications/childrens-social-care-market-study-final-report> [accessed 23 April 2023]
  - 4 Child Safeguarding Practice Review Panel, *National review into the murders of Arthur Labinjo-Hughes and Star Hobson*, (26 May 2022): <https://www.gov.uk/government/publications/national-review-into-the-murders-of-arthur-labinjo-hughes-and-star-hobson> [accessed 28 April 2023]
  - 5 Public Services Committee, *Children in crisis: the role of public services in overcoming child vulnerability*, (1st Report, Session 2021–22, HL Paper 95)
  - 6 The Strategy states that “a significant majority of that investment falls over the next two years in 22–23 and 24–25”. *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 16

### Box 1: National interventions

- The development of an ‘Early Career Framework’ for children’s social workers.
- An increase in financial support for foster carers, and a foster care recruitment and retention programme.
- Support for local authorities to recruit new child and family social worker apprentices.
- £30 million investment over two years in ‘family finding’, befriending and mentoring programmes for children in care and care leavers.
- An increase in support and opportunities for care leavers through the care leaver apprenticeship bursary and the leaving care allowance.
- £9 million investment in training and support for kinship carers.

Source: *The Strategy*, pp 19–21, p 98

5. The Government is trialling many substantial reforms through two ‘Pathfinder’ programmes.<sup>7</sup> Pathfinders will run trials in a small number of areas to assess whether the actions outlined in the *Strategy* will work effectively. This means that much of the *Strategy* will be delivered in a small number of areas, rather than across the whole of England, and will directly impact only the people who live in those areas.
  - The *Families First for Children* Pathfinder focuses on how early support is offered to children and families. This is explored in Chapter 3.
  - The *Regional Care Cooperative* Pathfinder, which will be explored in Chapter 5, trials a regionalised approach to the organisation of children’s care.
6. The actions in the *Strategy* will sit alongside the continued development and rollout of Family Hubs—dedicated locations where different services for families are located.<sup>8</sup>

#### The right direction

7. Overwhelmingly, our witnesses told us that the *Strategy* sets the right direction for children in the care system.
  - Josh MacAlister, who led the *Independent Review*, told us: “I genuinely think this is the right direction and that the Government made some very positive announcements.”<sup>9</sup>
  - Cathy Ashley, Chief Executive of the Family Rights Group, a charity working with families engaged with the care system, stated that “the *Strategy*’s direction of travel is welcome”, and welcomed the “emphasis on early help and trying to prevent crises.”<sup>10</sup>

7 The *Strategy* describes Pathfinders as “the programmes to test how reforms should be implemented and manage the associated risks, before wider roll-out (subject to various approvals and funding).”, *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023* p 176

8 See Public Services Committee, *Children in crisis: the role of public services in overcoming child vulnerability* (1st Report, Session 2021–22, HL Paper 95) pp 39–40.

9 [Q 3](#) (Josh MacAlister)

10 [Q 9](#) (Cathy Ashley)



- Anne-Marie Douglas, Chief Executive and founder of Peer Power, a social justice charity, said: “I absolutely support and welcome the focus on love and consistent relationships within the Government’s Strategy.”<sup>11</sup>
  - Joe Lane, Head of Policy and Research at Action for Children noted that the *Strategy* recognises “the issues where the social care system adds to the complexity in children’s and families’ lives.”<sup>12</sup>
8. **The Strategy contains much of what will be needed to address problems in children’s social care. The focus on “stable homes, built on love”, is the right approach. It is a solid starting point from which to make real progress for vulnerable children and their families.**

### Too small a step

9. The *Strategy* arose from a call by the *Independent Review* for “a whole system reset” to focus the system on early intervention and support, with an emphasis on loving relationships.<sup>13</sup> While he thought the *Strategy*’s direction was correct, Josh MacAlister, the lead reviewer, thought there had been a “missed opportunity”, “it is not of the scale of ... change that will see a tipping point in the system for some time.”<sup>14</sup> Children’s charity Barnardo’s were among others who told us that the “current programme of reforms lacks ambition to achieve the radical reset which is required.”<sup>15</sup> Joe Lane, Head of Policy and Research for Action for Children, stated that the scale of the *Strategy* “is pretty minimal. We could easily be sitting here in three or four years, potentially longer, with the same problems.”<sup>16</sup>

### Pathfinders

10. Pathfinders, which contain many of the substantive reforms, will be rolled out in a small number of areas.<sup>17</sup> Anne Longfield, Chair of the Commission on Young Lives and former Children’s Commissioner, argued that the approach of trialling reforms in this way, rather than introducing them nationally, would do little for many children in the care system now:

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11 Q 9 (Anne Marie Douglas)

12 Q 9 (Joe Lane)

13 *The independent review of children’s social care*, pp 15–21

14 Q 3 (Josh MacAlister)

15 Written evidence from Barnardo’s (CSC0003). See also QQ 2, 4 (Josh MacAlister), QQ 3–4 (Anne Longfield), Q 18 (Dame Rachel de Souza), Q 9 (Cathy Ashley, Joe Lane) and Barnardo’s, ‘Barnardo’s respond to the Government’s care review strategy’, (2 February 2023): <https://www.barnardos.org.uk/news/our-news/barnardos-responds-governments-care-review-strategy> [accessed 28 April 2023], Commission on Young Lives, ‘Anne Longfield’s response to the Government’s proposals to reform children’s social care’, (2 February 2023): <https://thecommissiononyounglives.co.uk/anne-longfields-response-to-the-governments-proposals-to-reform-childrens-social-care/> [accessed 28 April 2023], Local Government Association, ‘Children’s social care reform: implementation strategy and consultation’, (3 February 2023): <https://www.local.gov.uk/parliament/briefings-and-responses/childrens-social-care-reform-implementation-strategy-and#overarching-lga-view-> [accessed 28 April 2023]

16 Q 9 (Joe Lane)

17 The Strategy states that the Families First for Children Pathfinder will be run in up to 12 local areas over the next two years, with the first wave launching in three areas in September 2023, and a second wave commencing in 2024. The Regional Care Cooperative Pathfinders will run in two areas beginning in Spring 2024. The Strategy does not state which areas the Pathfinders will take place in. See: *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, pp 44, 102, 149.

“For the children who are in care now, or even those not in care, who do not have the kind of support that they deserve, it will be cold comfort to them that they have to wait, or the system has to wait, another three years until people decide.”<sup>18</sup>

11. We heard that some of the interventions and reforms already have strong evidence demonstrating their efficacy. Witnesses argued that these interventions should be rolled out nationally now rather than piloted for two years. Cathy Ashley stated that “We know what works ... you do not need a Pathfinder to determine that.”<sup>19</sup> Referring to a workforce measure, the Early Career Framework (see Chapter 4), Josh MacAlister told us of a cost-benefit analysis the *Independent Review* had conducted. This had found that a national rollout would deliver reforms which break even within five years.<sup>20</sup>
12. The *Strategy*, itself a consultation, commits to a further 10 consultations.<sup>21</sup> While some of these may be merged, some, such as the consultation of the use of agency staff, the re-examination of the funding formula for children’s services, and the development of a Children’s Social Care National Framework and Dashboard, will be conducted separately. Anne Longfield noted:

“The care system has really suffered from having a lot of reviews over many years. All of them have had great merit somewhere, but they have been a sticking plaster or an incremental addition. What you have here is a catalogue of reviews”.<sup>22</sup>

#### *Cross-Government support*

13. The *Strategy* will require support from multiple Government departments, including the Department for Work and Pensions,<sup>23</sup> the Home Office,<sup>24</sup> the Department for Health and Social Care,<sup>25</sup> the Department for Levelling Up,

18 [Q 4](#) (Anne Longfield)

19 [Q 9](#) (Cathy Ashley); See also [Q 7](#), [Q 9](#).

20 [Q 3](#) (Josh MacAlister). See also *The independent review of children’s social care*, pp 290–294.

21 Further consultations include: changing the funding formula for children’s services; the new Children’s Social Care national Framework and Dashboard; the role and use of agency staff; standards of care and regulations; strengthening corporate parenting principles; broadening the range of practitioners to be case holders; a survey of family support workers; safeguarding children which includes support for disabled children and multiagency working; making education a fourth statutory safeguarding partner; guidance on information sharing. Alongside this the Law Commission will review the rules around support for disabled children. The Government has also committed to publish strategies on data sharing and kinship care, and to introduce a financial oversight regime for independent fostering agencies and children’s homes. See: *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*.

22 [Q 3](#) (Anne Longfield)

23 For example, interventions relating to welfare support, see *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 51.

24 For example, interventions relating to modern slavery and human trafficking, see *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 185, and domestic abuse *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 62.

25 For example, interventions relating to secure settings, see *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023* p 104, family hubs *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 38 and workforce issues relating to adult social care, see *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 116.

Housing and Communities<sup>26</sup> and the Ministry of Justice.<sup>27</sup> It is a Department for Education publication and feels, we were told, “very much like a response from the Department for Education, not a government-wide response.”<sup>28</sup> Cathy Ashley pointed out that the *Strategy* has numerous commitments to discuss or explore issues with other departments, rather than to implement outcomes that had already been reached in discussions. She described this as “very weak.”<sup>29</sup>

14. Both the current and former Children’s Commissioner for England commented on the size of the team responsible for the *Strategy*. Dame Rachel de Souza, the current Commissioner, said: “At the start of a major reform program, we need to strengthen the department for children’s social care in the DfE as well ... the Department for Education’s team on children’s social care is tiny.”<sup>30</sup>
15. **The Strategy does not represent the radical reset the children’s care system needs. By design, the majority will see little benefit for several years. This represents a wasted opportunity.**
16. *We recognise it is not possible to roll-out all reforms, everywhere, immediately. However, the Government should ensure that all children’s care services see some benefits, soon.*
17. *The successful implementation of the Strategy will require substantial cross-departmental cooperation and political buy-in. The Prime Minister’s Delivery Unit should have responsibility for driving implementation and coordination between Departments. Further review and consultation should be minimised.*
18. *An interim update on the outcomes of key discussions between the Department for Education and other Government departments should be provided in the form of a Ministerial Statement to the House ahead of the 2023 summer recess. A full update, including departmental commitments and action plans, should be provided in the same form by October 2023.*

### Residential homes

19. The Government’s aspiration is to increase the proportion of children living safely with their family, family networks, or in foster care; and to decrease the proportion living in residential settings.<sup>31</sup> This was welcomed by our witnesses.<sup>32</sup> In many cases, though, for a variety of reasons, it may not be possible or safe for the young person to live with family or in foster care. In these instances, a residential home may be needed. Provision must reflect the diversity of need.

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26 Numerous interventions relating to local government, including for example local government funding. See *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 144.

27 *Ibid.*, p 104

28 **Q 9** (Cathy Ashley)

29 *Ibid.*

30 **Q 18** (Dame Rachel de Souza)

31 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 152

32 **Q 19** (Rachel de Souza), **Q 9** (Anne-Marie Douglas) and **Q 15** (John Pearce). See also, Appendix 3. One young person explained their fear, having watched the television show Tracy Beaker, and another told us that residential homes had been “marketed as the last resort”.

20. We explore in Chapter 5 the severe shortage of placements within residential homes. This has meant that in some cases, young people are placed far from their families, and that providers have been able to raise prices to profit from this shortage.<sup>33</sup> The Government's approach to addressing this is Regional Care Cooperatives. Aside from availability, however, there is very little information within the *Strategy* around the role of residential homes; Barnardo's told us that the strategy "does little to consider the role of residential care settings".<sup>34</sup>
21. While an attempt to reduce the need for residential care settings (through early intervention, and a focus on families) was strongly welcomed by our witnesses, we were told that for some young people, residential care will be the best option. It must be of a high quality.<sup>35</sup>
22. Noting this, Barnardo's called for the Government to invest in further provision and development of "hybrid placements" of care, "where children spend some time in residential care and some with birth family, kinship care, or perhaps foster care".<sup>36</sup> This has not been raised within the *Strategy*.
23. We heard concerns about the quality of residential care and the wellbeing of children who live there. Dame Rachel de Souza said children's homes could be "a focus of criminal gangs and exploitation" and noted the abuse of children with disabilities in residential homes in Doncaster.<sup>37</sup> Attendees to our engagement event told us that residential homes can feel like "prison". They were also described as "inhumane". While some attendees to our engagement session had had positive experience of specific kinds of residential homes, others complained about the behaviour of the staff.<sup>38</sup> There is little in the *Strategy* that acknowledges the scale of the problem or outlines policies to address this.
24. **We consider that the Strategy's focus on stable, loving homes ignores the need for radical reform of residential homes. There are likely to always be some children who need this kind of provision for at least some of the time. Not enough has been done for these young people in the Strategy: action needs to be taken to raise standards.**

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33 CMA, *Children's social care market study final report*, (10 March 2022), p 52: <https://www.gov.uk/government/publications/childrens-social-care-market-study-final-report> [accessed 28 April 2023], CMA, 'Action needed on "dysfunctional" children's social care market', (10 March 2022): <https://www.gov.uk/government/news/action-needed-on-dysfunctional-children-s-social-care-market> [accessed 12 May 2023], *The independent review of children's social care*, pp 167–168. The Local Government Association (LGA) also explore this issue, see LGA, 'Profit making and risk in independent children's social care placement providers', (March 2022): <https://www.local.gov.uk/profit-making-and-risk-independent-childrens-social-care-placement-providers> [accessed 12 May 2023]

34 Written evidence from Barnardo's (CSC0003)

35 Written evidence from Barnardo's (CSC0003) and the Children's Services Development Group (CSC0005)

36 Written evidence from Barnardo's (CSC0003)

37 [QQ 19, 22](#) (Dame Rachel de Souza). See BBC, "Failure at every level" led to children's homes abuse, report says' (20 April 2023): <https://www.bbc.co.uk/news/uk-65323711> [accessed 11 May 2023] and the Child Safeguarding Practice Review Panel, *Safeguarding children with disabilities and complex health needs in residential setting: phase 2 report* (April 2023): [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1151060/Safeguarding\\_children\\_with\\_disabilities\\_in\\_residential\\_care\\_homes\\_phase\\_2\\_report.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1151060/Safeguarding_children_with_disabilities_in_residential_care_homes_phase_2_report.pdf) [accessed 11 May 2023]

38 See Appendix 3.

### *Funding*

25. Witnesses repeatedly referred to a lack of security with the funding allocated by the *Strategy*.<sup>39</sup> The *Independent Review* called for a £1.03 billion investment in the first two years of the *Strategy* and total investment of £2.6 billion over four years.<sup>40</sup>
26. The £200 million investment over the next two years announced amounts to less than 20% of the amount called for in the first two years. The Committee heard that this funding decision and the scale of reforms was a false economy. Josh MacAlister stated:
- “We know that when we do not get this right, the costs are enormous. The societal costs are huge, but the financial costs for public spending are enormous as well. The argument is so clear that I cannot understand why we would not go faster on this and go sooner.”<sup>41</sup>
27. Alongside concerns about the amount of funding, there are concerns about the lack of clarity on funding for future reform. While the *Strategy* says the initial £200 million is to “lay the groundwork for future, long term reform”, it gives no indication of the amount which will be invested in that longer term reform, and no funding was allocated in the Spring 2023 Budget.<sup>42</sup>
28. **The level of investment outlined in the Strategy is entirely inadequate and will ensure the Government will fail to achieve its vision for children’s social care.**

### **Box 2: Our inquiry**

We launched our inquiry on 27 February 2023. Considering the timeline of the Government’s consultation, we chose to conduct a short inquiry so that our findings could form part of the *Strategy*’s consultation responses.

In addition to taking oral evidence, we received a small number of written submissions. We also conducted an online engagement event with young people who had experience of the care system. We are very grateful to all who contributed to this inquiry, particularly to the young people who told us their stories, whose words are at the beginning of each chapter.

Our inquiry focuses on the Implementation Strategy and consultation, which applies to England. As such, the inquiry covers largely devolved matters and our recommendations apply to England. However, some may be of interest to the devolved administrations

39 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 12, [Q 3](#) (Josh MacAlister), [Q 4](#) (Anne Longfield), [Q 9](#) (Cathy Ashley), [Q 15](#) (John Pearce), [Q 17](#) (Sally Burlington) and written evidence from Kinship ([CSC0001](#)) and Barnardo’s ([CSC0003](#))

40 *The Independent Review of children’s social care*, p 27, see also [Q 3](#) Josh MacAlister.

41 [Q 3](#) (Josh MacAlister)

42 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 12, see also HM Treasury, *HM Treasury, Spring Budget 2023*: <https://www.gov.uk/government/publications/spring-budget-2023> [accessed 28 April 2023]



## CHAPTER 2: THE VOICES OF YOUNG PEOPLE

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*“No one really listened or asked what I wanted.”<sup>43</sup>*

Comment from a care-experienced young person.

### Contributions to the Strategy

29. The *Strategy* acknowledges that, “for decades, children in care, care leavers and care-experienced people have been telling local authorities, successive governments, and the public that we are failing them.” It recognises that the voices of children in care and care leavers are crucial in underpinning the vision that it sets out.<sup>44</sup> Barnardo’s said there had been a number of opportunities to ensure that children and young people and the voluntary sector could contribute thoughts to its development.<sup>45</sup>
30. The *Strategy* is 219 pages long. The Government has published a *Guide for children and young people*.<sup>46</sup> Rose Akinsulire, a young person with care-experience, thought that more could have been done to make the *Guide* accessible to young people, including those who may not have the best literacy skills: “it is readable, but it could be presented in a different way.”<sup>47</sup> Within the *Guide*, there are nine questions for young people. Of these, only five directly relate to commitments made in the *Strategy*.<sup>48</sup> There are British Sign Language captioned and audio versions of the summary and the *Guide*.<sup>49</sup> However, despite the inclusion of content relating to support for children and young people with disabilities, the Government has not published a version of the *Strategy* designed to be accessible for those with learning disabilities. This contrasts with the decision to do so for other relevant documents.<sup>50</sup>

### The voice of young people in decision making

31. Most of the young people we spoke to emphasised that, throughout their experiences of the care system, they had not felt listened to by the people making decisions about their care. Rose Akinsulire reported themes of her discussions with other care-experienced young people who:

“often do not feel they are listened to, but it is on all sides; it is not just the local authority, it is kinship care, foster parents or a care home they are in ... they do not feel they are being supported. They often feel that decisions are being made for them in their best interests, but it is harming them; because it is harming them and they are under 16 they are told that their opinion or views are not necessarily valid.”<sup>51</sup>

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43 See Appendix 3.

44 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 88

45 Written evidence from Barnardo’s (CSC0003)

46 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 88

47 Q 11 (Rose Akinsulire)

48 The remaining four ask for views on the guide and the questions themselves (QQ 6–7), and for information on the respondent (QQ 8–9).

49 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 88

50 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, pp 26 and 102. See Department for Education, *SEND and alternative provision improvement plan*, CP 800 (2 March 2023): <https://www.gov.uk/government/publications/send-and-alternative-provision-improvement-plan> [accessed 24 April 2023].

51 Q 9 (Rose Akinsulire)

32. The Children's Commissioner, whose remit is to "take children's voices to the heart of Government" thought that there was "lots that could be done" to increase representation of young people. She noted that she was working with the Department for Education to establish a children in care and care leavers' group.<sup>52</sup>

### Commitments in the Strategy

33. The *Strategy* refers to the voice of young people in relation to Family Help (see Chapter 3), where multi-disciplinary teams will work with children and families to deliver support, including through family group decision-making. It is one of the questions to be tested in the *Families First for Children* Pathfinder. The inclusion of young people's voices is also mentioned in reforms to kinship care, and the department states that their regional care model (see Chapter 5) will give children more voice and choice in decision making.<sup>53</sup>
34. Outside of the proposals for advocates, which will be discussed in paragraphs 37–42, we heard that the *Strategy* provides little direction on how to ensure the voices of children and young people would be embedded in their care. Anne-Marie Douglas thought that the *Strategy* had "a weakness around how they are going to listen to children in the system and have them fully and meaningfully involved" in the development of services. She called this a "huge gap".<sup>54</sup>
35. **We consider many of the references throughout the Strategy to the voices of children and young people to be vague and ineffective.**

### Advocacy

36. Advocacy aims to give a voice to young people and help them to understand and exercise their rights. The *Independent Review* found that, "when done well, advocacy can empower young people to understand and realise their rights at pivotal moments".<sup>55</sup> Anne-Marie Douglas emphasised that "there is a real need for that independent advocacy",<sup>56</sup> and the Children's Commissioner argued that "children's voices are central to this".<sup>57</sup>
37. The availability and accessibility of advocacy services is variable. The *Independent Review* described advocacy as "an afterthought in the current system."<sup>58</sup> We found, when we met young people, that basic information about their care had not been communicated with them—several had had the same experience of being put into a car with a stranger without explanation.<sup>59</sup> Advocacy provides a potential solution to this, but we have been told that

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52 [QQ 22, 18](#) (Dame Rachel de Souza)

53 [Stable Homes, Built on Love: Implementation Strategy and Consultation: Children's Social Care Reform 2023](#), p 104

54 [Q 9](#) (Anne-Marie Douglas)

55 [The Independent Review of children's social care](#), p 140

56 [Q 9](#) (Anne-Marie Douglas)

57 [Q 19](#) (Dame Rachel de Souza)

58 [The independent review of children's social care](#), p 181

59 See Appendix 3. One young person said, of their arrival at a foster care placement, "I was just thrown in there ... didn't know who it was." Another described the "awkward" situation of "walking into some strangers house ... they didn't know that I was coming".

young people can struggle to access advocacy services. They may not even be made aware they can ask for an advocate.<sup>60</sup>

38. **Throughout the inquiry it became abundantly clear that the voices of young people are often not heard when decisions are made about their care.**
39. We also heard concerns about the independence of such services that are available. In some cases, advocates “did not really prioritise the issues [young people] were facing ... because in a way they were supporting the local authority.”<sup>61</sup> This was highlighted in the *Independent Review* finding that these roles are: “too often ineffective ... they lack the necessary independence from those providing services.”<sup>62</sup>
40. The *Independent Review* recommended developing a “new ‘opt-out’ legal right to advocacy for all children in care”.<sup>63</sup> The Government accepted that recommendation, and the *Strategy* commits to developing policy to implement an opt-out model of independent advocacy.<sup>64</sup> This was welcomed as “a real move forward”,<sup>65</sup> which would inform young people of their entitlements.<sup>66</sup> The extent of the independence for the advocacy services remains questionable: any services commissioned by a local authority could struggle to perform the function of criticising that authority when necessary.
41. **We welcome the commitment to develop an independent, opt-out advocacy service. It will go a long way to ensure that the best interests of young people are protected.**
42. ***Changes to advocacy services must ensure full independence from the local authorities they will need to hold to account. The Department for Education should look again at how to ensure advocacy services can be fully independent: organising them as regional or national delivery programmes.***

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60 Oral evidence taken before the Public Services Committee, One-off session on the role of public services in assessing child vulnerability: follow-up, 7 September 2022 (Session 2022–23), [Q 2](#) and written evidence from Action for Children ([CSC0002](#))

61 [Q 9](#) (Rose Akinsulire)

62 *The independent review of children's social care*, p 176

63 *Ibid.*, p 113

64 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children's Social Care Reform 2023*, p 96

65 [Q 10](#) (Anne-Marie Douglas)

66 Supplementary written evidence from Action for Children ([CSC0002](#))



## CHAPTER 3: CREATING LOVING HOMES

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*“Homes should be built on love, but not everyone knows what love is.”<sup>67</sup>*

Comment from a care-experienced young person.

### Prevention over cure

43. The *Strategy* stresses the value of early support for children and families. Early intervention, as we have repeatedly set out, can prevent problems from becoming complex and embedded.<sup>68</sup> Ultimately, it can support parents to care for their children in a safe and loving environment, avoiding and preventing crises.<sup>69</sup>
44. However, witnesses told us that there has been a “70% reduction in early intervention money over the decade.”<sup>70</sup> We heard that these cuts meant children and families services had become focused on crisis intervention, which often came at a higher financial cost.<sup>71</sup> Josh MacAlister stated:
- “we have seen much more of the spending, activity and energy in the children’s social care system shift from earlier, very helpful work with families before they hit crisis to being spent on things when they are often too late for families, which is very costly and often not as effective.”<sup>72</sup>
45. The *Strategy* stresses the value of early intervention.<sup>73</sup> ‘Family Help’ is the proposed solution. Family Help is a proposed new structure for early help and intervention services for children and families, bringing together ‘targeted early help’ and ‘child in need’ services.<sup>74</sup>

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67 See Appendix 3.

68 See Public Services Committee, *A critical juncture for public services: lessons from COVID-19*, (1st Report, Session 2019–21, HL Paper 167), pp 9–18, Public Services Committee, *Children in crisis: the role of public services in overcoming child vulnerability* (2nd Report, Session 2021–22, HL 95), pp 7, 17–20 and 25–27, Public Services Committee, *Fit for the future? Rethinking the public services workforce* (1st Report, Session 2022–23, HL Paper 48) pp 10 and 21, Public Services Committee, *Emergency healthcare: a national emergency* (2nd Report, Session 2022–23, HL 130) pp 5, 7, and 17 and Public Services Committee, *A critical juncture for public services: lessons from COVID-19*, (1st Report, Session 2019–21; HL Paper 167), p 7

69 Oral evidence taken before the Public Services Committee inquiry on Designing a public services workforce fit for the future, 16 March 2022 (Session 2021–22), [Q 33](#) (Sian Elliott)

70 [Q 2](#) (Anne Longfield), see also The Health Foundation, ‘Public health grant: what it is and why greater investment is needed’, (March 2023): <https://www.health.org.uk/news-and-comment/charts-and-infographics/public-health-grant-what-it-is-and-why-greater-investment-is-needed> [accessed 24 April 2023]

71 [QQ 2–3](#) (Josh MacAlister), [QQ 2, 4](#) (Anne Longfield), [QQ 9, 11](#) (Cathy Ashley), [Q 17](#) (Sally Burlington), [Q 18](#) (Dame Rachel de Souza) and written evidence from Barnardo’s ([CSC0003](#))

72 [Q 2](#) (Josh MacAlister)

73 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 12

74 There is no common definition for “targeted early help”. When referring to targeted early help the Independent Review is referring to: “targeted early help which manages complex needs through casework” see *The independent review of children’s social care*, p 48. The definition of “Child in need” is rooted in legislation – a ‘child in need’ is a child thought to need extra help from children’s services to achieve or maintain “a reasonable standard of health or development” – see Children Act 1989, [section 17](#).

### Box 3: Family Help

Family Help is intended to support families to raise children with “a loving, stable or safe family life that meets their needs”, addressing problems early and supporting families “before they reach crisis point”, resulting in fewer crisis interventions and fewer children being taken into a care.

Services will be delivered by multidisciplinary teams, and will include “support from universal, community and specialist services” with support being tailored to the needs of service users and communities. Family Help services will work with other parts of children’s services, including child protection, schools and health visitors.

The Government will trial Family Help as part of the Families First for Children Pathfinder, investing £45 million in up to 12 areas in the next two years.

Source, *The Strategy*, pp 18 and 33

46. The focus on Family Help was welcomed by witnesses, including those speaking on behalf of local authorities and Directors of Children’s Services, who stressed that this was the right direction for the Government to be taking.<sup>75</sup>
47. Joe Lane, Head of Policy and Research at Action for Children, thought that “it addresses two quite distinct problems”: the obligation of the local authority when a child is in need (the Family Help team will owe specific obligations); and a differential in how services delivering their duties interpret them. He said: “There is at least the kernel of a proposal from Government to say, ‘We are going to provide policy clarity on what helps a child in need of support’, and we hope that should mean there is less need for this additional early help category.” He also noted that they could facilitate family support workers spending more of their time talking to families.<sup>76</sup>
48. We were told it was important that Family Help teams should be “dedicated resources”<sup>77</sup> to indicate where specific support is needed, but that “the challenge has always been resourcing”.<sup>78</sup> Witnesses welcomed the multidisciplinary approach in this scheme but noted that there was a “big question” about how authorities could draw on a workforce, many parts of which are already “very overstretched”.<sup>79</sup>
49. The Local Government Association state that “children living in the vast majority of the country will not benefit” from the reforms.<sup>80</sup> We were told that they should be mandated,<sup>81</sup> but they are only being trialled in “up to 12 local areas”. While this is intended as an evaluation tool, we were told that: “We do not, in our view, need to test everything that we are going to test. There is a really strong basis on which we could do some investment straightaway.”<sup>82</sup>

75 [Q3](#) (Josh MacAlister), [QQ 9–10](#) (Joe Lane), [Q 15](#)

76 [Q 9](#) (Joe Lane)

77 *Ibid.*

78 [Q 15](#) (John Pearce)

79 [Q 15](#) (Sally Burlington)

80 Local Government Association, *Children’s social care reform: implementation strategy and consultation* (3 February 2023): <https://www.local.gov.uk/parliament/briefings-and-responses/childrens-social-care-reform-implementation-strategy-and#pillar-5-a-valued-supported-and-highly-skilled-social-worker-for-every-child-who-needs-one> [accessed 28 April 2023]

81 [Q 9](#) (Joe Lane)

82 [Q 17](#) (Sally Burlington)

Dame Rachel de Souza, the Children's Commissioner, agreed: "we know a lot of this already so let us get going".<sup>83</sup>

50. We heard that services outside the Pathfinder areas would see little difference in the immediate future. Anne Longfield stated that for staff outside the Pathfinders "it will be less clear to see quite how immediately this will impact on you ... you will not feel that immediate impact, which is an opportunity lost."<sup>84</sup>
51. John Pearce, the then-Vice President of the Association of Directors of Children's Services, wanted to spread Family Help, and other key learnings from those Pathfinders, rapidly. He noted that children's services had effective best practice regional networks which would enable sharing best practice quickly.<sup>85</sup> However, assertions that local authorities will be well able to share and implement best practices should be viewed with caution. John Pearce noted resourcing would be a barrier to implementing findings from the Pathfinders.<sup>86</sup> Previous reports from this Committee have highlighted barriers to sharing good practices across public services.<sup>87</sup> When speaking about measures to roll out good practice Dame Rachel de Souza said of local and national government: "they are not moving fast enough, and the ambition is not big enough."<sup>88</sup>
52. **The Strategy's approach to 'Family Help' represents a step in the right direction. However, the decision to trial Family Help in a small number of areas will delay crucial, well-evidenced reforms to the care system, meaning more children will be left behind.**
53. ***The Government should urgently examine which elements of Family Help could be rolled out nationally and provide funding to all local authorities delivering children's social care to introduce these policies, to ensure children and families across England feel some benefit from the strategy. Funding for local authorities to make these changes should be provided at the same time as they are introduced.***

#### *Family Help and Family Hubs*

54. Our previous work has welcomed the important part played by Family Hubs—dedicated locations where different services for families are located.<sup>89</sup> In February 2023, we were pleased to note an investment of £300 million

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83 [Q 18](#) (Dame Rachel de Souza)

84 [Q 3](#) (Anne Longfield)

85 [Q 15](#) (John Pearce). See also [Q 15](#) (Sally Burlington) and written evidence from the LGA ([CSC0009](#)). This appetite from local authorities was also commented on by Josh MacAlister, see [Q 4](#).

86 [Q 15](#) (John Pearce)

87 See for example Public Services Committee, *Emergency healthcare: a national emergency* (2nd Report, Session 2022–23, HL Paper 130), pp 43–46 and *Children in crisis: the role of public services in overcoming child vulnerability* (1st Report, Session 2021–22, HL Paper 95), pp 28, 30

88 [Q 18](#) (Dame Rachel de Souza)

89 The Strategy describes Family Hubs as "a place-based way of joining up locally in the planning and delivery of family services. They bring services together to improve access and improve the connections between families, professionals, practitioners, services, and providers. Hubs are designed to put relationships at the heart of family support." *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children's Social Care Reform 2023*, pp 12, 173. See Public Services Committee, *Children in crisis: the role of public services in overcoming child vulnerability* (1st Report, Session 2021–22, HL Paper 95], Chapter 8.

until 2025 to allow 75 areas to benefit from Family Hubs. Family Hubs were envisaged to act as a “one stop shop” for families.<sup>90</sup>

55. We heard concerns that the role of Family Hubs may not have been adequately considered in the design and implementation of Family Help. The comments the *Strategy* does make about how they will interact are somewhat vague. It says that Family Help will “work alongside” Family Hub services,<sup>91</sup> and “falls within wider services” such as Family Hubs.<sup>92</sup> It also states that the Pathfinders looking at Family Help will consider “how to best use models such as Family Hubs as a non-stigmatising route to Family Help.”<sup>93</sup>
56. We heard that interaction between Family Hubs and Family Help presented strong opportunities to support service users. This included families transitioning onto Family Help via Family Hubs, and to ensure that those who are moving away from Family Help services are not facing “a cliff edge” but instead experiencing a “seamless transition” onto services delivered and signposted through Family Hubs.<sup>94</sup> The Family Hubs Network argued that: “This requires a culture and system of working together which the phrase ‘work alongside’ does not articulate sufficiently”.<sup>95</sup> Sally Burlington, Policy Director at the Local Government Association, emphasised the need for evaluation of the interaction of the two initiatives.<sup>96</sup>
57. ***The existing learning from Family Hubs and the services they deliver should form an important part of the Implementation Strategy. The Department should set clear expectations for how Family Help and Family Hub services should work closely together to provide seamless transitions between early help and universal services.***

### Kinship care

58. Young people can, if their parents are not suitable guardians, be looked after by a relative or friend. This is formally known as kinship care.

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90 Department for Education (DfE), ‘Thousands of families to benefit from local support in rollout of family hubs’, (9 February 2023): <https://www.gov.uk/government/news/thousands-of-families-to-benefit-from-local-support-in-rollout-of-family-hubs> [accessed 4 May 2023]

91 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 33

92 *Ibid.*, p 34

93 *Ibid.*, p 46

94 Written evidence from the Family Hubs Network ([CSC0008](#))

95 *Ibid.*

96 [Q 15](#) (Sally Burlington)

**Box 4: Kinship care**

Kinship, a kinship care charity, describes kinship care as “when a child lives full-time or most of the time with a relative or friend who isn’t their parent, usually because their parents aren’t able to care for them.”<sup>97</sup>

There are over 150,000 children living in kinship care in England.<sup>98</sup> Around half of kinship carers are grandparents, but siblings, family friends or aunts and uncles can also be kinship carers. Kinship care can be conducted through a Special Guardianship Order or Child Arrangement Order, and through fostering,<sup>99</sup> however the majority of kinship care arrangements are informal.<sup>100</sup>

59. Research from the Nuffield Trust shows that young people in kinship care generally have better outcomes than young people in residential or foster caring.<sup>101</sup> The Family Rights Group note that children in kinship care “feel a greater sense of identity, love and belonging, have more stability in their living arrangements, and better educational outcomes than other children”.<sup>102</sup> Josh MacAlister told us that these families might have better answers than professionals for how to look after and raise their kin.<sup>103</sup> The *Strategy* acknowledges that relationships between kinship carers and young people can develop more easily and last longer than other forms of care.<sup>104</sup>
60. Kinship care is more cost-effective to deliver than other forms of care.<sup>105</sup> Kinship argue that “for every 1000 children that are raised in kinship families rather than the care system, the government saves £40 million and increases the lifetime earnings of those children by £20 million”.<sup>106</sup>

*Suitability of kinship carers*

61. The *Strategy* is clear that kinship care should be the preferred option where children cannot live with their parents.<sup>107</sup>
62. Young people we spoke to emphasised that there should be tight checks and monitoring to ensure that this was safe for the young person. At least three attendees had been placed with relatives who had allowed visits from other family members, including people they had been removed from. We heard that this has allowed abuse to continue in at least one case which, in their

97 Written evidence from Kinship (CSC0001)

98 See Kinstat, *The prevalence and characteristics of children growing up with relatives in the UK*, - briefing paper 001, University of Bristol (2015): [https://www.bristol.ac.uk/media-library/sites/sps/documents/Kinship/Kinstat\\_%20Briefing%20Paper%20001\\_V2.pdf](https://www.bristol.ac.uk/media-library/sites/sps/documents/Kinship/Kinstat_%20Briefing%20Paper%20001_V2.pdf) [accessed 28 April 2023]

99 Kinship Compass, ‘What is kinship care?’: <https://compass.kinship.org.uk/advice-and-information/what-is-kinship-care/> [accessed 4 May 2023]

100 Written evidence from Kinship (CSC0001)

101 See Nuffield Foundation, *The lifelong health and wellbeing trajectories of people who have been in care: findings from the Looked-after Children Grown up Project* (July 2021), p 2: <https://www.nuffieldfoundation.org/wp-content/uploads/2021/07/The-lifelong-health-and-wellbeing-trajectories-of-people-who-have-been-in-care.pdf> [accessed 11 May 2023].

102 Supplementary written evidence from the Family Rights Group (CSC0004)

103 Q 5 (Josh MacAlister)

104 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 76

105 Written evidence from Kinship (CSC0001) and Q 5

106 Written evidence from Kinship (CSC0001), drawing on a report from Nicol Economics. See Nicol Economics, *Kinship care: the opportunity* (January 2020): [https://kinship.org.uk/wp-content/uploads/Final\\_economic\\_case\\_text.pdf](https://kinship.org.uk/wp-content/uploads/Final_economic_case_text.pdf) [accessed 15 May 2023] and Q 19 (Dame Rachel de Souza).

107 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, pp 75–76 and written evidence from Kinship (CSC0001)



words, “should never have happened”.<sup>108</sup> Rose Akinsulire told the Committee that the appropriateness of kinship care “depends on the state of the family”, noting the risk that “they could still have access to that person who could be causing that child harm.”<sup>109</sup> The *Strategy* said that managing “challenges” with kinship care starts from the point of assessment to become a kinship carer. It notes that assessments should be “proportionate”.<sup>110</sup>

63. **We welcome the increased emphasis on kinship care and the proportionate approach suggested for assessment of suitability. We urge the Department for Education not to lose sight of the need to ensure that young people will be safe with the new carer. Ongoing monitoring may also be required.**

*Challenges for kinship carers*

64. Kinship carers face significant financial challenges. Cathy Ashley noted that “50% of kinship carers have to give up work to take on the children”, leaving them reliant on the benefits system “which is not designed for their needs of the needs of their children”.<sup>111</sup> She called financial support for kinship carers a “postcode lottery”.<sup>112</sup>
65. Josh MacAlister described kinship carers facing “perverse incentives”, noting that in some cases grandparents caring for their grandchildren have had to become foster carers to access financial support. In doing so they have had to give parental responsibility to the local authority.<sup>113</sup> We were told that 89% of kinship carers worry about their financial situation.<sup>114</sup> These concerns were reflected by the young people we spoke to who had experience living in kinship care. One attendee spoke of a relative unable to afford bunk beds for the children to sleep in. They were unable to access financial support for this. The *Strategy* itself acknowledges that “those who grow up in kinship care are frequently exposed to poverty”.<sup>115</sup>

*Support for kinship carers*

66. The *Strategy* includes a commitment to publish and consult on a kinship care strategy before the end of 2023. This will review issues such as educational entitlements, training and improving local authority practice—as well as “updating on reform activity such as exploring financial allowances”.<sup>116</sup>
67. The Government has set out immediate interventions to support kinship carers both nationally and in specific areas as part of the Family First Pathfinders.<sup>117</sup>

108 See Appendix 3.

109 [Q 9](#) (Rose Akinsulire)

110 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 77

111 [Q 9](#) (Cathy Ashley) and supplementary written evidence from the Family Rights Group ([CSC0004](#))

112 [Q 9](#) (Cathy Ashley)

113 Oral evidence taken before the Public Services Committee, One-off session on the role of public services in addressing child vulnerability: follow-up, 7 September 2022, [Q 2](#) (Josh MacAlister), see also [Q 9](#) (Cathy Ashley).

114 Kinship, *Financial allowances survey 2022* (June 2022): <https://kinship.org.uk/wp-content/uploads/Kinship-Financial-Allowances-Survey-2022.pdf> [accessed 4 May 2023]

115 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 78

116 *Ibid.*, p 19

117 *Ibid.*, pp 75–81

- Trialling the introduction of family group decision-making and Family Network Support Packages, in the Family First for Children Pathfinder areas. This would provide families with mechanisms to develop a plan to support the child drawing on wider family networks instead of being taken into care.
  - “Investing £9 million in a training and support offer for all kinship carers”.<sup>118</sup>
  - Extending legal aid to prospective Special Guardians looking to take on the responsibility of a young person on a means-tested basis in private law proceedings. The Government has also committed to “explore possible options for an extension of legal aid” to Special Guardians and kinship carers with a Child Arrangement Order.<sup>119</sup>
68. While the extension of legal aid to prospective Special Guardians in private proceedings was welcomed, we heard that many kinship carers would be unable to access it, as it was means-tested. Moreover, “the vast majority of special guardianship orders” arise through public law proceedings, meaning many prospective Special Guardians will not be eligible for legal aid under the new extension.<sup>120</sup> Cathy Ashley from the Family Rights Group called for legal aid to be extended to all kinship carers without a means-test, arguing that without legal advice and representation for kinship carers court proceedings “the danger is that it will not work in the best interests of the child.”<sup>121</sup>
69. One immediate action the Government suggests is for local authorities to review their existing support offers for kinship carers, including financial support for some formalised carers.<sup>122</sup>
70. Statements that the Government will “update on reform activity such as exploring financial allowances” are, Barnardo’s pointed out, vague: they do not represent “firm commitment to provide a national policy” on allowances or other types of support.<sup>123</sup>
71. We were told: “people often don’t recognise themselves as kinship carers; they just think of themselves as the granny taking on a grandchild, or aunts and uncles”.<sup>124</sup> There is no legal definition of kinship care, and Kinship argue that existing guidance has “resulted in a patchy postcode lottery of poor—and sometimes unlawful—support for kinship carers”.<sup>125</sup> While the Government have committed to developing a definition,<sup>126</sup> there is no indication that this would be set in primary legislation. A definition in statute would help individuals and public agencies identify kinship carers

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118 *Ibid.*, p 19

119 *Ibid.*, p 191

120 [Q 9](#) (Cathy Ashley). Ministry of Justice statistics show that in 2021, 3965 special guardianship orders were made in public law proceedings compared to 870 in private law proceedings. See Ministry of Justice, *Family Court Statistics Quarterly: October to December 2022*: <https://www.gov.uk/government/statistics/family-court-statistics-quarterly-october-to-december-2022> [accessed 12 May 2023]

121 [Q 9](#) (Cathy Ashley)

122 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 153

123 Written evidence from Barnardo’s ([CSC0003](#))

124 [Q 9](#) (Cathy Ashley)

125 Written evidence from Kinship ([CSC0001](#))

126 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 83

and children in kinship care situations, and could mean that they are able to access support more consistently across different local authorities regardless of whether the kinship care arrangement is formal or informal.<sup>127</sup> Without a legal definition the impact of changes for formalised carers (those with a special guardianship order or with child arrangement orders) may not extend to the majority of kinship carers, who are in an informal arrangement.<sup>128</sup>

72. ***The Kinship Care Strategy, when published, should ensure that sufficient financial support for those caring for their kin is provided regardless of whether the arrangement is formal or informal, and that it is consistent across England. Additional funding should be allocated to local authorities to provide this support in the immediate future.***
73. ***Legal definitions of 'kinship care' and 'kinship carer' should be set out in primary legislation so that children and families in informal kinship care arrangements can access support.***

### Foster care

74. Where it is not possible for young people to be placed with family members, they can be placed with foster carers, who care for young people in their homes. Research from the Nuffield Foundation indicates that children placed in foster care generally have better outcomes than those in residential care.<sup>129</sup> Several witnesses highlighted the value of foster care, with Children's Commissioner Dame Rachel de Souza wanting to see "really developed foster care so we can actually have children living with individuals who care for them in the most home-like, safe environment".<sup>130</sup> We heard some positive experiences from young people, many of whom had become embedded with foster families.
75. The *Strategy* stresses the importance of foster care, with one of its overall aims being to ensure "there are enough of the right kinds of foster homes" so that residential settings are needed only "where it is definitely the right option for them, for example if a child has specific and intensive therapeutic needs".<sup>131</sup>

### Shortage of carers

76. There is a shortage of foster carers.<sup>132</sup> The Family Rights Group said that the lack of suitable foster care placements to meet demand contributed to a "crisis in the care system".<sup>133</sup> Research from Ofsted indicates that the number of foster carers has decreased by 4% since 2018, while the number of children

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127 Q 9 (Cathy Ashley)

128 Written evidence from Kinship (CSC0001). For further information on informal and formal kinship care see *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children's Social Care Reform 2023*, p 85, for comments on how a legal definition of kinship care would offer improved support for carers, see Q 9 (Cathy Ashley).

129 See Nuffield Foundation, *The lifelong health and wellbeing: trajectories of people who have been in care: findings from the Looked-after Children Grown up Project* (July 2021), p 2: <https://www.nuffieldfoundation.org/wp-content/uploads/2021/07/The-lifelong-health-and-wellbeing-trajectories-of-people-who-have-been-in-care.pdf> [accessed 4 May 2023].

130 Q 19 (Dame Rachel de Souza)

131 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children's Social Care Reform 2023*, p 152

132 Q 7 (Josh MacAlister)

133 Supplementary written evidence from Cathy Ashley, Family Rights Group (CSC0004)



living in care has risen by 9%.<sup>134</sup> We have also been made aware that there is a “rapidly aging profile” of foster carers, which suggests that availability will continue to decrease.<sup>135</sup> Young people who spoke to us stressed that it was difficult for working adults to become foster carers due to an expectation they would be available 24 hours a day.<sup>136</sup>

77. The shortage of foster carers can lead to placements that are not in the best interests of the child. The Competition and Markets Authority review found that:

“the placements market, particularly in England and Wales, is failing to provide sufficient supply ... so that looked-after children can consistently access placements that properly meet their needs, when and where they require them. This means that some children are being placed in settings that are not appropriate for their own circumstances.”<sup>137</sup>

78. The lack of appropriate placements means that, in the absence of choice, young people may be placed in foster care settings which are unsuitable for their needs. The *Independent Review* gave three examples of what inappropriate placements could mean:

- being separated from siblings,
- being moved far from their home,
- or being placed with a carer not equipped for their needs.

This was borne out by the young people we met, some of whom told us that they were unable to stay with their siblings, including in one case their twin. This latter is far from an isolated incident: we were told that 20,000 children in England are living as separated siblings.<sup>138</sup> We also heard from one young person who had suffered with bulimia but had been placed with a carer who was afraid of vomit.<sup>139</sup>

#### *Foster care recruitment*

79. Several witnesses suggested there may be untapped appetite to become a foster carer. Dame Rachel said, “we are not doing enough to allow the people who want to be foster carers to do it”.<sup>140</sup> She shared an example of a senior civil servant with extensive relevant experience who had tried to become a foster carer: “He was looked at with suspicion. He had a terrible time”.<sup>141</sup>
80. Joe Lane said that there were very different approaches being taken by different local authorities on how to recruit foster carers; this “makes it

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134 Ofsted, *Fostering in England 1 April 2021 to 31 March 2022: Fostering in England 1 April 2021 to 31 March 2022*: <https://www.gov.uk/government/statistics/fostering-in-england-1-april-2021-to-31-march-2022/fostering-in-england-1-april-2021-to-31-march-2022> [accessed 4 May 2023]

135 Association of Directors of Children’s Services (ADCS), *An alternative vision of Regional Care Cooperatives; organising and operating at the right level to meet the needs of children and young people* (May 2023): [https://adcs.org.uk/assets/documentation/ADCS\\_alternative\\_vision\\_for\\_RCCs.pdf](https://adcs.org.uk/assets/documentation/ADCS_alternative_vision_for_RCCs.pdf) [accessed 4 May 2023]

136 See Appendix 3.

137 CMA, *Children’s social care market study and report* (10 March 2022), Chapter 3: <https://www.gov.uk/government/publications/childrens-social-care-market-study-final-report> [accessed 28 April 2023]

138 [Q 19](#) (Dame Rachel de Souza)

139 See Appendix 3.

140 [Q 21](#) (Dame Rachel de Souza)

141 *Ibid.*

difficult to create depth of expertise or benefit from scale and learning in other areas of the country.”<sup>142</sup>

*Suitability of foster carers*

81. Despite the foster carer recruitment process apparently being challenging to applicants, the Committee heard concerns about the quality of some foster cares. Children’s Commissioner Dame Rachel de Souza told us: “I hear so many stories of children in foster who are having a great experience but too many who are not”.<sup>143</sup> The young people who attended our engagement session had had mixed experiences, and in evidence to us Rose Akinsulire shared her own experience of foster care. For her this had “included abuse and some really horrible things”.<sup>144</sup>
82. **Current foster care recruitment programmes are not delivering the number of foster care placements needed, and in some cases are failing adequately to ensure the safety of children in foster care.**
83. *The Department for Education should provide further detail on its plans to increase foster care recruitment. These must be proportionate in ensuring that only those who are fit and proper to be caring for a young person are allowed to do so, whilst also allowing foster caring to be accessible to working people.*

*Foster care recruitment in the Strategy*

84. The *Strategy* commits to boosting the recruitment and retention of foster carers through investing “over £27 million over the next two years”.<sup>145</sup> This funding will be allocated as follows:
- A £3 million “fostering recruitment and retention programme” in the North East, which will “introduce a regional support hub” focused on supporting applications, improving retention and targeted communications.<sup>146</sup>
  - A £24 million investment in recruitment and retention. This will have a regional focus on recruitment which considers shortage areas and specific shortages for children with specific needs. The regions receiving this support will be selected in autumn 2023 and launched in summer 2024.<sup>147</sup>
  - These regional programmes will ultimately be merged into and rolled out with Regional Care Cooperatives (see Chapter 5).
  - The National Minimum Allowance for foster carers will be increased by 12.4% from 1 April 2023—an above-inflation increase.<sup>148</sup>
85. The *Strategy* has no targets to reflect the stated ambitions to increase the numbers of foster carers; and to improve the rate of retention, both of which

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142 Supplementary written evidence from Joe Lane, Action for Children (CSC0002)

143 Q 21 (Dame Rachel de Souza)

144 Q 9 (Rose Akinsulire). See Appendix 3 for detail on the engagement session.

145 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 19

146 *Ibid.*

147 *Ibid.*, pp 145–146

148 *Ibid.*, p 98

they aim to achieve within the next two years.<sup>149</sup> There is a commitment to introduce metrics, but until those are published it is difficult to judge how ambitious plans are.<sup>150</sup>

86. **The aim to boost the number of foster carers in England is undermined by the failure to include targets or metrics in the Strategy.**
87. *The Department for Education should urgently set regional and national targets for foster carer recruitment and retention. These should include targets for specialist carers.*

*Support for foster carers*

88. We were told that foster carers needed more support than is available. Rose Akinsulire told us:

“There is not enough training for these foster carers in order to support young people properly. By increasing the numbers, you might put more young people at risk because there are not enough people being trained well enough to know how to deal with the complex needs of young people who have gone through a lot of trauma”.<sup>151</sup>

89. Anne Longfield stressed the importance of improving support to prevent a “constant churn of instability of placements”, and both she and Josh MacAlister noted that more “specialist foster carers” were needed. These might be carers with skills to support people with specific conditions or specific experiences, such as children seeking asylum.<sup>152</sup> Concerns were raised in the Committee’s engagement event that foster carers did not always know how to handle issues common with trauma, such as young children struggling with toilet training.<sup>153</sup>
90. *Recruitment and retention campaigns must come alongside improvements in training and support for foster carers, to ensure they can provide safe, loving homes for young people in care.*

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149 *Ibid.*, p 166

150 *Ibid.*, p 152

151 [Q 10](#) (Rose Akinsulire)

152 [Q 7](#) (Anne Longfield, Josh MacAlister), see also [Q 21](#) (Dame Rachel de Souza).

153 See Appendix 3.

## CHAPTER 4: WORKFORCE

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*[Of social workers] "I was going through them like tic tacs."*<sup>154</sup>

Comment from a care-experienced young person.

### Recruitment and retention

91. Our report, *Fit for the Future? Rethinking the public services workforce*, highlighted challenges across the public sector in recruitment and retention, including high turnover, increased staff stress and staff feeling “exhausted and overstretched.”<sup>155</sup> This is reflected in the children’s social care workforce, with witnesses describing “huge deficits” in staffing.<sup>156</sup>

#### Box 5: Children’s services workforce

- In 2022, 31,600 children and family social workers were in post.<sup>157</sup>
- There were 7,900 vacancies. This represents a 21% increase since 2021. In 2022, 5,400 workers left the children’s social work workforce, an increase of 9% from the number who left in 2021.<sup>158</sup>
- In 2022, agency workers made up almost one in five children’s social care staff (18%).<sup>159</sup> The MacAlister Review estimates the use of agency workers costs an additional £100 million per year.<sup>160</sup>
- The majority of local authorities who responded to relevant surveys cited recruitment and retention as a key challenge.<sup>161</sup>

92. Turnover in the people who care for young people seriously affected some of those who we met. Attendees noted that churn meant that social workers could not engage with them properly, nor develop trusting relationships. Sometimes a social worker would not know the young person’s name, and they reported regularly having to repeat their stories to new staff.<sup>162</sup>

### Recruitment efforts

93. The *Strategy* states that the Government will “boost social worker recruitment by exploring ways to recruit up to 500 additional child and family social worker apprenticeships nationally.”<sup>163</sup> While there are commitments to enhance the “offer” for social workers, there are no additional targets on

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154 See Appendix 3.

155 Public Services Committee, *Fit for the future: rethinking the public services workforce* (1st Report, Session 2022–23, HL Paper 48), para 79

156 Q 4 (Anne Longfield). The Local Government Association argued that local government budget challenges meant local government salaries were “less competitive” compared to private providers and to supermarkets and warehouses, see written evidence from the Local Government Association (CSC0009).

157 Department for Education, ‘Children’s social care workforce’, (23 February 2023): <https://explore-education-statistics.service.gov.uk/find-statistics/children-s-social-work-workforce/2022> [accessed 12 May 2023]. All figures are full-time equivalent.

158 *Ibid.*

159 *Ibid.*

160 *The independent review of children’s social care*, p 238

161 Department for Education, ‘Children’s social care workforce’, (23 February 2023): <https://explore-education-statistics.service.gov.uk/find-statistics/children-s-social-work-workforce/2022> [accessed 12 May 2023]

162 See Appendix 3; see also Q 9 (Anne-Marie Douglas).

163 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 21

recruitment. A separate consultation on the child and family social worker workforce aims to reduce overreliance on agency staff. It does not focus on recruitment.<sup>164</sup>

94. Cathy Ashley criticised the use of the word “explore” elsewhere in the *Strategy*.<sup>165</sup> As noted above, “exploring ways” to achieve an outcome does not represent a concrete commitment. The commitments to work with the Department of Health and Social Care and Social Work England to “explore” the role of bursaries and education support grants, and to “explore” how international recruitment can be made as straightforward as possible are similarly vague.<sup>166</sup>
95. The *Strategy* does not make provision for other roles. Barnardo’s were concerned that the *Strategy* “does not go far enough” to address workforce concerns” outside the social worker workforce, nor to create an attractive offer for other careers such as residential care workers or personal advisers providing support to care leavers.<sup>167</sup>
96. **The success of the Strategy will rely heavily on the children’s social care workforce. There is not enough in the Strategy on recruiting additional staff to support those already performing demanding roles in difficult circumstances. Without more ambitious recruitment targets, the objectives of the Government’s reforms will not be achieved.**

### Supporting the workforce

#### *Boosting skills*

97. The *Strategy* commits to several interventions on boosting social workers’ skills and expertise, including the introduction of an Early Career Framework for children’s social workers, with an ambition that this be rolled out from September 2026 following trials.<sup>168</sup> Meanwhile the Family Help Pathfinder will trial the use of multidisciplinary teams delivering family services.
98. Witnesses were generally positive about these innovations, with John Pearce welcoming the Early Career Framework and praising the increased focus on multidisciplinary teams in Family Help pilots. He said this “gives a real opportunity to have a much greater breadth and mix in our workforce.”<sup>169</sup>

#### *A missed opportunity?*

99. Both the Early Career Framework and the introduction of multidisciplinary teams are being trialled and developed in a small number of areas, meaning that staff in the majority of the country will not feel any effect of them until

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164 Department for Education, ‘Children’s social care workforce’, (2 February 2023): <https://consult.education.gov.uk/social-work-reform-unit/child-and-family-social-worker-workforce/> [accessed 15 May 2023]

165 Q 9 (Cathy Ashley)

166 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 124

167 Written evidence from Barnardo’s (CSC0003)

168 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 122

169 Q 14 (John Pearce). The Department for Education (DfE) have previously highlighted the efficacy of the Early Career Framework in the teaching workforce to the Committee - see oral evidence taken before the Public Services Committee, inquiry on designing a public services workforce fit for the future, 2 March 2022,(Session 2021–22), [QQ 9, 10, 13, 16, 17](#)

they are implemented nationally.<sup>170</sup> See Chapter 3 for further discussion of this approach.

*Focusing the workforce on young people and families*

100. Many children's services staff do not work directly with children. Josh MacAlister stated that "of the 30,000 workers in children's social care, 10,000 are not doing any direct work with children and families", but instead work in quality assurance, leadership and management.<sup>171</sup> He argued that many of the staff who work directly with children spend too little time doing so, spending just a third of their time working directly with children and families.<sup>172</sup> They are often "brokering other services to do the work that they themselves came into the system to do."<sup>173</sup> He pointed to the incongruity of a "rigid, linear, risk averse system working with the messy world of family life."<sup>174</sup>
101. The *Strategy* commits the Government to refocusing the efforts of children's care staff onto children and families, and away from bureaucracy. This involves taking steps to reduce workload pressures, particularly work "that [does] not lead to improvements in outcomes for children and families".<sup>175</sup> This includes establishing an Action Group on Workload Reduction from early 2023, researching how data recording impacts social worker workloads, and working with local authorities and the DHSC on case management systems. The aims of such reforms have been welcomed. Sally Burlington stated that some elements "could have a really helpful impact", noting work on case management.<sup>176</sup> However, it is unclear whether these interventions will result in reduced workloads in the long-term—much is dependent on the outcomes of research and meetings of the Action Group, and of those between government departments and local authorities.
102. **Steps to maximise the amount of time staff spend directly supporting families are welcome. However, most children's care staff will not see the benefits of these interventions in the short term.**
103. ***The Government should roll out workforce interventions nationally more rapidly. While not all interventions can be applied to England at once, steps should be taken by October 2023 to ensure all children's social workers see some benefit from the Strategy.***

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170 Q 3 (Anne Longfield)

171 Q 4 (Josh MacAlister). Department for Education workforce statistics state that of the 31,600 children and family social workers in post, 20,200 were case holders, see Department for Education, 'Children's social care workforce', (23 February 2023): <https://explore-education-statistics.service.gov.uk/find-statistics/children-s-social-work-workforce/2022> [accessed 12 May 2023]. The Independent Review states: "we have assumed that social workers classified by the Department for Education (DfE) children's social care workforce statistics 2021 as a 'case holder' or 'senior practitioner' are involved in holding cases and working directly with children and families. This may overestimate the proportion who are holding cases as there will be variation in the responsibilities of senior practitioners." See *The independent review of children's social care*, p 228.

172 *The independent review of children's social care*, p 228, see also Department for Education, *Longitudinal study of local authority child and family social workers (Wave 3)*, (July 2021), pp 54–55: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1008153/Longitudinal\\_study\\_of\\_local\\_authority\\_child\\_and\\_family\\_social\\_workers\\_Wave\\_3\\_.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1008153/Longitudinal_study_of_local_authority_child_and_family_social_workers_Wave_3_.pdf) [accessed 12 May 2023]

173 Q 4 (Josh MacAlister)

174 *Ibid.*

175 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children's Social Care Reform 2023*, p 127

176 Q 14 (Sally Burlington)



## CHAPTER 5: ORGANISING AND COMMISSIONING CARE

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*“I moved around quite a bit, never stayed in one place for more than six months ... none of it ever worked out.”<sup>177</sup>*

Comment from a care-experienced young person.

### Problems in the care market

104. During the inquiry and in the course of other reviews of the children's care system, several key problems in the care market have been identified. These include:
- Local authorities' being unable to forecast demand and plan effectively;<sup>178</sup>
  - Young people being placed in unsuitable settings, whether in homes which do not meet their specialist needs, far away from their communities, and/or separately from their siblings;<sup>179</sup>
  - The supply of care placements failing to meet demand, and profiteering in the sector.<sup>180</sup>
  - The Government's Regional Care Cooperatives Pathfinder is intended to address these issues.

### Regional Care Cooperatives

105. Regional Care Cooperatives are a model for providing homes for children in which responsibility for planning, commissioning, and delivering children's social care sits at a regional level, rather than with local authorities.<sup>181</sup> The Government expects this regional approach to improve planning and boost the number of available care placements, addressing the shortage of appropriate placements and empowering local authorities to manage the care market.<sup>182</sup>
106. Regional Care Cooperatives will be trialled in two areas through the *Regional Care Cooperative Pathfinder*, which will be co-designed with local authorities and “partners across health, justice and the third sector”.<sup>183</sup> The size and boundaries of the areas the Pathfinder will take place in have not been set out.

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177 See Appendix 3.

178 CMA, *Children's social care market study final report*, (10 March 2022), pp 12, 62: <https://www.gov.uk/government/publications/childrens-social-care-market-study-final-report> [accessed 12 May 2023] and *The independent review of children's social care*, pp 159–161]

179 See Chapter 3 for information on inappropriate settings. On children being placed a long way from their birth homes, see written evidence from Barnardo's (*CSC0003*), Action for Children (*CSC0002*) and *Q 21* (Dame Rachel de Souza).

180 CMA, *Children's social care market study final report*:, (10 March 2022), p 52: <https://www.gov.uk/government/publications/childrens-social-care-market-study-final-report> [accessed 28 April 2023], CMA, 'Action needed on “dysfunctional” children's social care market', (10 March 2022): <https://www.gov.uk/government/news/action-needed-on-dysfunctional-children-s-social-care-market> [accessed 12 May 2023] and *The independent review of children's social care*, pp 167–168. The Local Government Association (LGA) also explore this issue, see LGA, *Profit making and risk in independent children's social care placement providers* (March 2022): <https://www.local.gov.uk/profit-making-and-risk-independent-childrens-social-care-placement-providers> [accessed 12 May 2023]

181 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children's Social Care Reform 2023*, pp 102–106

182 *Ibid.*, pp 104–105

183 *Ibid.*, p 104

107. This chapter will briefly set out the issues noted above, how the Government believes Regional Care Cooperatives will address those issues, and views expressed by our witnesses about how effective these measures would be.

*Planning and forecasting challenges*

108. In a 2022 review of the children's social care market, the Competition and Markets Authority (CMA) stated that large care providers do not consider local authority forecasts of future need to be accurate and do not use them to inform capacity expansion decisions.<sup>184</sup> The absence of reliable forecasts of care demand therefore inhibits local authorities in procuring sufficient placements for children.<sup>185</sup> This, we were told, can be one of the reasons local authorities lack appropriate placements for children and young people in their area and often need to organise placements at short notice and high cost—these can be a distance from the child's home, school or community.<sup>186</sup>
109. The *Strategy* states that forecasting demand, and planning in response will operate more effectively at a regional level. This is in part due to “better economies of scale”—the *Strategy* states that Regional Care Cooperatives “will have the financial force and shared risk to plan ahead and invest in homes and models of care that individual local authorities currently lack.” Support will be provided for forecasting, and the Government expects this regional approach to improve the running and provision of homes for children with complex needs.<sup>187</sup> Sally Burlington believed that “the more strategic elements of ... forecasting and sufficiency planning could be well managed” at a regional level.<sup>188</sup>
110. By contrast, Children's Commissioner Dame Rachel de Souza stressed the importance of local autonomy and argued that Directors of Children's Services in local authorities needed greater freedom to develop solutions in their own areas. She stated that when considering provision for young people who need specialist services regional working “makes absolute sense”.<sup>189</sup> The concern is that planning on a regional level may not allow for such local autonomy.
111. It is also not clear that better forecasting alone would increase the number of placements—it is well established that there are not enough placements in the care system, but knowledge of this has not resulted in the number of placements increasing to meet demand.
112. ***Built into the evaluation plan for Regional Care Cooperatives should be an assessment of any improvement in planning and forecasting. This should distinguish between the causes for any such improvement: whether they arise from national support for forecasting; or whether they arise from collaboration between local authorities.***

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184 CMA, *Children's social care market study final report*: (10 March 2022), p 62: <https://www.gov.uk/government/publications/childrens-social-care-market-study-final-report>, [accessed 28 April 2023]

185 *Ibid.*, p 12

186 See [Q 2](#) (Josh MacAlister, Anne Longfield) and [Q 21](#) (Dame Rachel de Souza).

187 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children's Social Care Reform 2023*, pp 102 and 104

188 [Q 13](#) (Sally Burlington); see also [Q 13](#) (John Pearce).

189 [Q 21](#) (Dame Rachel de Souza)



*The right homes in the right places*

113. As noted in Chapter 3, many young people report that their needs and concerns are not adequately considered when decisions are made about their care.<sup>190</sup> The *Strategy* argues: “A regional model of care will ultimately increase the availability of the right homes in the right places for children who need them—giving children more voice and choice in decision-making”.<sup>191</sup>
114. We heard that children are too often moved far from their communities and families. Barnardo’s stated that the provision of residential places is “patchy and not distributed evenly across the country”, exacerbating this problem.<sup>192</sup> This can contribute to children feeling isolated and lonely, and in some cases create barriers to accessing services if they live outside their ‘home’ local authority.<sup>193</sup>
115. Sally Burlington, Policy Director at the Local Government Association, expressed concerns that councils might lose the ability to “direct decisions with the child at the very centre of the decision because of a need to think on a more regional footprint ... we would be worried about the voice of the child being lost in those arrangements”.<sup>194</sup> The Children’s Commissioner also stressed the importance of the local authority’s “personal responsibility to that child”.<sup>195</sup>
116. While in most cases maintaining support networks already in place will be the right thing to do, there will be others where the best interests of the child would be served by physical distance from their families.<sup>196</sup> Flexibility, maintaining the focus on the specific young person, and keeping their voice central to discussions, will be key in making these decisions.
117. ***In evaluating the success of the Regional Care Cooperatives the Government must consider the experiences and voices of young people and families, alongside measuring how many are placed at a distance from their homes and communities.***

*Commissioning, sufficiency and the role of independent providers*

118. The CMA described the care market as “dysfunctional”. It stated that prices and profits of larger providers were “materially higher than we would expect

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190 See Chapter 3 for information on inappropriate settings. On children being placed a long way from their birth homes, see written evidence from Barnardo’s (CSC0003), Action for Children (CSC0002) and Q 21 (Dame Rachel de Souza).

191 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 104

192 Written evidence from Barnardo’s (CSC0003), Action for Children (CSC0002), Q 9 (Rose Akinsulire), Q 11 (Anne Marie Douglas), Q 21 (Dame Rachel de Souza) and ‘Children in care moved 500 miles from home due to “broken system”’, *The I*, (25 April 2023): <https://inews.co.uk/news/children-moved-500-miles-from-home-broken-care-system-2294312> [accessed 18 May 2023]

193 Written evidence from Barnardo’s (CSC0003)

194 Q 13 (Sally Burlington); similar points were made by Children’s Commissioner Dame Rachel de Souza, see Q 21, and in written evidence from Barnardo’s, (CSC0003).

195 Q 21 (Dame Rachel de Souza)

196 Q 9 (Rose Akinsulire); see also Appendix 3.

them to be if this market were working well”.<sup>197</sup> Echoing this, the *Independent Review* described “profiteering” in the sector.<sup>198</sup>

119. Local authorities face “a great shortage of placements”.<sup>199</sup> This has been described as a “calamity”.<sup>200</sup> Shortages exist in the foster carer system (see Chapter 3) and in the provision of residential care homes.<sup>201</sup> The CMA report that the under-supply of places means that they are filled “even if they are not in the best location or do not provide the most suitable environment for the children placed in them.”<sup>202</sup>
120. The *Strategy* states that improved planning and forecasting will boost the number of care placements available, including in foster care.<sup>203</sup> It also states that commissioning will improve through local authorities in Regional Care Cooperatives sharing learning, comparing prices with others in the Regional Care Cooperative and publishing prices secured.<sup>204</sup> The *Strategy* states that these measures, alongside improved foster care recruitment reducing demand for residential care places, will empower local authorities to manage the care market and reduce what the *Independent Review* described as “profiteering”<sup>205</sup>.
121. However, John Pearce was sceptical that operating on a regional level would significantly boost local authorities control of the care market:

“With about 80% of the residential care provision currently sitting with independent providers, many of which are backed by private equity, the suggestion that in the North East the 12 authorities coming together are going to have more influence over a substantial provider backed by a state investment fund than an individual local authority, and that that is going to change the dynamic, is flawed.”<sup>206</sup>

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197 CMA, *Children’s social care market study final report:*, (10 March 2022), p 52: <https://www.gov.uk/government/publications/childrens-social-care-market-study-final-report>, [accessed 28 April 2023] and CMA, ‘Action needed on “dysfunctional” children’s social care market’, (10 March 2022): <https://www.gov.uk/government/news/action-needed-on-dysfunctional-children-s-social-care-market> [accessed 12 May 2023]

198 *The independent review of children’s social care*, pp 167–168. The Local Government Association (LGA) also explore this issue, see LGA, *Profit making and risk in independent children’s social care placement providers* (March 2022): <https://www.local.gov.uk/profit-making-and-risk-independent-childrens-social-care-placement-providers> [accessed 12 May 2022]

199 Q 13 (Sally Burlington)

200 Q 9 (Joe Lane); see also CMA, *Children’s social care market study final report:* (10 March 2022), p 9: <https://www.gov.uk/government/publications/childrens-social-care-market-study-final-report>, [accessed 28 April 2023]

201 Written evidence from Barnardo’s (CSC0003); see also Association of Directors of Children’s Services (ADCS), *An alternative vision of Regional Care Cooperatives; organising and operating at the right level to meet the needs of children and young people* (May 2023): [https://adcs.org.uk/assets/documentation/ADCS\\_alternative\\_vision\\_for\\_RCCs.pdf](https://adcs.org.uk/assets/documentation/ADCS_alternative_vision_for_RCCs.pdf) [accessed 4 May 2023], QQ 7, 10 (Rose Akinsulire), Q 19 (Dame Rachel de Souza) and supplementary written evidence from Action for Children (CSC0002)

202 CMA, *Children’s social care market study final report* (10 March 2022), p 61: <https://www.gov.uk/government/publications/childrens-social-care-market-study-final-report>, [accessed 28 April 2023]

203 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 104. This suggestion was supported by a coalition of independent providers, see written evidence from the Children’s Services Development Group (CSC0005).

204 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023*, p 105

205 *The independent review of children’s social care*, p 120

206 Q 13 (John Pearce)

He argued “Regional Care Cooperatives will not answer the challenges” of placement sufficiency, noting previous attempts to organise regionally had been ineffective.<sup>207</sup>

122. Barnardo’s expressed concern that smaller fostering and residential care providers, who may bring strong relationships with the community, might be disadvantaged by a regional approach to procurement. Contracts, they thought, could instead disproportionately be allocated to larger providers. This “risks exacerbating current challenges with sufficiency with fewer larger providers wielding significant market power”.<sup>208</sup>

### Alternative approaches to the care market

123. Barnardo’s challenged the decision to approach sufficiency challenges through regional coordination, noting that the comparable Regional Adoption Agency had “failed to deliver on its objective of placing more children for adoption sooner”. They called for a “national sufficiency strategy” with national government providing funding, oversight and support for commissioning at a local authority level.<sup>209</sup>
124. The Association of Directors of Children’s Services have published an “alternative vision of regional Care Cooperatives”.<sup>210</sup> They recommend “a more nuanced approach” to commissioning arrangements, giving local authorities more choice in how they collaborate on commissioning. They advocate for different types of care to be organised and managed at different levels. Foster care could be organised sub-regionally with strategic sufficiency oversight handled at a regional level. They also call for sufficiency duties to be shared across partners beyond local authorities, such as health services, for children with complex needs.
125. **The Strategy argues that regional planning and delivery will ensure a greater number of care placements. We are unconvinced by this argument: the scheme does not empower local authorities, nor will it increase the number of care placements or related resources. A sound argument for this approach has not yet been made. Alternative approaches should be explored.**
126. *When trialling Regional Care Cooperatives, the Department for Education must review the impact of regional procurement on smaller providers. Steps should be taken to ensure that a regional approach to procurement does not result in large providers wielding disproportionate influence.*
127. *Evaluation of the Regional Care Cooperatives Pathfinder should include the number of additional care placements delivered or procured compared with past performance and other regions.*

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207 Q 13 (John Pearce); see also written evidence from Barnardo’s (CSC0003).

208 Written evidence from Barnardo’s (CSC0003)

209 *Ibid.*

210 Association of Directors of Children’s Services (ADCS), *An alternative vision of Regional Care Cooperatives; organising and operating at the right level to meet the needs of children and young people* (May 2023): [https://adcs.org.uk/assets/documentation/ADCS\\_alternative\\_vision\\_for\\_RCCs.pdf](https://adcs.org.uk/assets/documentation/ADCS_alternative_vision_for_RCCs.pdf) [accessed 12 May 2023]

### Accountability and oversight

128. The *Strategy* states that the Government will review regulations and care standards throughout the whole children's care system,<sup>211</sup> and has committed to working with Ofsted to develop an inspection framework aligned with these new standards.<sup>212</sup> The *Independent Review* stated that alongside regulatory oversight Regional Care Cooperatives should at the same time be owned by and accountable to the local authorities in the region.<sup>213</sup>
129. John Pearce suggested that transferring responsibilities of local authorities for planning, commissioning and delivering care placements to regionally focused Regional Care Cooperatives could create a “democratic deficit” or “issues in local accountability and local democratic control over decision-making that sits with [local authorities] currently.”<sup>214</sup> Similar points were made by Barnardo's, who called for “a system of Government oversight for the new system” which includes publication of data such as stability of placements and rates of children going missing from placements. They also called for a requirement for Ofsted to inspect regional commissioning of placements.<sup>215</sup>
130. ***The introduction of Regional Care Cooperatives must not result in weaker accountability and oversight. If the Government chooses to proceed with the rollout of Regional Care Cooperatives, this must come alongside a strong accountability regime, about which further information should be provided.***

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211 In the consultation on a National Dashboard and Framework for children's care; see Chapter 1.

212 *Stable Homes, Built on Love: Implementation Strategy and Consultation: Children's Social Care Reform 2023*, p 105

213 *The independent review of children's social care*, pp 162–166

214 **Q 13** (John Pearce)

215 Written evidence from Barnardo's ([CSC0003](#))

## SUMMARY OF CONCLUSIONS AND RECOMMENDATIONS

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### Introduction

1. The Strategy contains much of what will be needed to address problems in children's social care. The focus on "stable homes, built on love", is the right approach. It is a solid starting point from which to make real progress for vulnerable children and their families. (Paragraph 8)
2. The Strategy does not represent the radical reset the children's care system needs. By design, the majority will see little benefit for several years. This represents a wasted opportunity. (Paragraph 15)
3. *We recognise it is not possible to roll-out all reforms, everywhere, immediately. However, the Government should ensure that all children's care services see some benefits, soon.* (Paragraph 16)
4. *The successful implementation of the Strategy will require substantial cross-departmental cooperation and political buy-in. The Prime Minister's Delivery Unit should have responsibility for driving implementation and coordination between Departments. Further review and consultation should be minimised.* (Paragraph 17)
5. *An interim update on the outcomes of key discussions between the Department for Education and other Government departments should be provided in the form of a Ministerial Statement to the House ahead of the 2023 summer recess. A full update, including departmental commitments and action plans, should be provided in the same form by October 2023.* (Paragraph 18)
6. We consider that the Strategy's focus on stable, loving homes ignores the need for radical reform of residential homes. There are likely to always be some children who need this kind of provision for at least some of the time. Not enough has been done for these young people in the Strategy: action needs to be taken to raise standards. (Paragraph 24)
7. The level of investment outlined in the Strategy is entirely inadequate and will ensure the Government will fail to achieve its vision for children's social care. (Paragraph 28)

### The voices of young people

8. We consider many of the references throughout the Strategy to the voices of children and young people to be vague and ineffective. (Paragraph 35)
9. Throughout the inquiry it became abundantly clear that the voices of young people are often not heard when decisions are made about their care. (Paragraph 38)
10. We welcome the commitment to develop an independent, opt-out advocacy service. It will go a long way to ensure that the best interests of young people are protected. (Paragraph 41)
11. *Changes to advocacy services must ensure full independence from the local authorities they will need to hold to account. The Department for Education should look again at how to ensure advocacy services can be fully independent: organising them as regional or national delivery programmes.* (Paragraph 42)



### Creating loving homes

12. The Strategy's approach to 'Family Help' represents a step in the right direction. However, the decision to trial Family Help in a small number of areas will delay crucial, well-evidenced reforms to the care system, meaning more children will be left behind. (Paragraph 52)
13. *The Government should urgently examine which elements of Family Help could be rolled out nationally and provide funding to all local authorities delivering children's social care to introduce these policies, to ensure children and families across England feel some benefit from the strategy. Funding for local authorities to make these changes should be provided at the same time as they are introduced.* (Paragraph 53)
14. *The existing learning from Family Hubs and the services they deliver should form an important part of the Implementation Strategy. The Department should set clear expectations for how Family Help and Family Hub services should work closely together to provide seamless transitions between early help and universal services.* (Paragraph 57)
15. We welcome the increased emphasis on kinship care and the proportionate approach suggested for assessment of suitability. We urge the Department for Education not to lose sight of the need to ensure that young people will be safe with the new carer. Ongoing monitoring may also be required. (Paragraph 63)
16. *The Kinship Care Strategy, when published, should ensure that sufficient financial support for those caring for their kin is provided regardless of whether the arrangement is formal or informal, and that it is consistent across England. Additional funding should be allocated to local authorities to provide this support in the immediate future.* (Paragraph 72)
17. *Legal definitions of 'kinship care' and 'kinship carer' should be set out in primary legislation so that children and families in informal kinship care arrangements can access support.* (Paragraph 73)
18. Current foster care recruitment programmes are not delivering the number of foster care placements needed, and in some cases are failing adequately to ensure the safety of children in foster care. (Paragraph 82)
19. *The Department for Education should provide further detail on its plans to increase foster care recruitment. These must be proportionate in ensuring that only those who are fit and proper to be caring for a young person are allowed to do so, whilst also allowing foster caring to be accessible to working people.* (Paragraph 83)
20. The aim to boost the number of foster carers in England is undermined by the failure to include targets or metrics in the Strategy. (Paragraph 86)
21. *The Department for Education should urgently set regional and national targets for foster carer recruitment and retention. These should include targets for specialist carers.* (Paragraph 87)
22. *Recruitment and retention campaigns must come alongside improvements in training and support for foster carers, to ensure they can provide safe, loving homes for young people in care.* (Paragraph 90)

### Workforce

23. The success of the Strategy will rely heavily on the children's social care workforce. There is not enough in the Strategy on recruiting additional staff to support those already performing demanding roles in difficult circumstances. Without more ambitious recruitment targets, the objectives of the Government's reforms will not be achieved. (Paragraph 96)
24. Steps to maximise the amount of time staff spend directly supporting families are welcome. However, most children's care staff will not see the benefits of these interventions in the short term. (Paragraph 102)
25. *The Government should roll out workforce interventions nationally more rapidly. While not all interventions can be applied to England at once, steps should be taken by October 2023 to ensure all children's social workers see some benefit from the Strategy.* (Paragraph 103)

### Organising and commissioning care

26. *Built into the evaluation plan for Regional Care Cooperatives should be an assessment of any improvement in planning and forecasting. This should distinguish between the causes for any such improvement: whether they arise from national support for forecasting; or whether they arise from collaboration between local authorities.* (Paragraph 112)
27. *In evaluating the success of the Regional Care Cooperatives the Government must consider the experiences and voices of young people and families, alongside measuring how many are placed at a distance from their homes and communities.* (Paragraph 117)
28. The Strategy argues that regional planning and delivery will ensure a greater number of care placements. We are unconvinced by this argument: the scheme does not empower local authorities, nor will it increase the number of care placements or related resources. A sound argument for this approach has not yet been made. Alternative approaches should be explored. (Paragraph 125)
29. *When trialling Regional Care Cooperatives, the Department for Education must review the impact of regional procurement on smaller providers. Steps should be taken to ensure that a regional approach to procurement does not result in large providers wielding disproportionate influence.* (Paragraph 126)
30. *Evaluation of the Regional Care Cooperatives Pathfinder should include the number of additional care placements delivered or procured compared with past performance and other regions.* (Paragraph 127)
31. *The introduction of Regional Care Cooperatives must not result in weaker accountability and oversight. If the Government chooses to proceed with the rollout of Regional Care Cooperatives, this must come alongside a strong accountability regime, about which further information should be provided.* (Paragraph 130)

## APPENDIX 1: LIST OF MEMBERS AND DECLARATIONS OF INTEREST

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### Members

Baroness Morris of Yardley (Chair)  
 Lord Bach  
 Baroness Bertin  
 Lord Blencathra  
 Baroness Campbell of Surbiton  
 Lord Carter of Coles  
 Lord Laming  
 Lord Porter of Spalding  
 Lord Prentis of Leeds  
 Lord Shipley  
 Baroness Stedman-Scott  
 Lord Willis of Knaresborough

### Declarations of interest

Baroness Morris of Yardley (Chair)  
*No relevant interests to declare*

Lord Bach  
*No relevant interests to declare*

Baroness Bertin  
*No relevant interests to declare*

Lord Blencathra  
*No relevant interests to declare*

Baroness Campbell of Surbiton  
*No relevant interests to declare*

Lord Carter of Coles  
*Chair and Shareholder of Glenholme Healthcare Ltd (long-term care of elderly and those with learning difficulties)*  
*Health Services Laboratories, (a joint venture between the NHS and SONIC, an Australian pathology provider of pathology testing)*  
*Royal Wolverhampton NHS Trust Special Board Adviser*

Lord Laming  
*Was a social worker, a director of social care services and the Chief Inspector of Social Care services*

Lord Porter of Spalding  
*Non-executive director, on the board of Department for Levelling up, Housing and Communities (DLUHC)*  
*Local Government Association (LGA) National Lead Peer*  
*Non-executive director, NORSE Group*  
*Leader, South Holland District Council (to May 2023)*

Lord Prentis of Leeds  
*General Secretary, Unison, the public services union (until January 2021)*  
*President, Public Service International (PSI) which is the global body for public service workers and their unions*

Lord Shipley  
*Vice President, Local Government Association*

Baroness Stedman-Scott  
*Former minister at the Department of Work and Pensions*



Lord Willis of Knaresborough

*No relevant interests to declare*

A full list of Members' interests can be found in the Register of Lords Interests:  
<https://members.parliament.uk/members/lords/interests/register-of-lordsinterests>.

## APPENDIX 2: LIST OF WITNESSES

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Evidence is published online at <https://committees.parliament.uk/work/7341/review-of-the-childrens-social-care-implementation-strategy-and-family-hubs-rollout/publications/> and available for inspection at the Parliamentary Archives (020 7219 3074)

Evidence received by the Committee is listed below in chronological order of oral evidence session, and then in alphabetical order. Those witnesses marked with \*\* gave both oral evidence and written evidence. Those marked with \* gave oral evidence and did not submit any written evidence. All other witnesses submitted written evidence only.

### Oral evidence in chronological order

*	Anne Longfield CBE, Chair, Commission for Young People and former Children's Commissioner for England	<a href="#">QQ 1–7</a>
*	Josh MacAlister, Chair, What works for children; social care and former Chair, Independent Review of Children's Social Care (IRCSC)	<a href="#">QQ 1–7</a>
*	Rose Akinsulire, Peer Leader, Peer Power Youth	<a href="#">QQ 8–11</a>
**	Cathy Ashley OBE, Chief Executive, Family Rights Group	<a href="#">QQ 8–11</a>
*	Anne-Marie Douglas, Chief Executive Officer / Founder, Peer Power Youth	<a href="#">QQ 8–11</a>
**	Joe Lane, Head of Policy and Research, Action for Children	<a href="#">QQ 8–11</a>
*	Sally Burlington, Director of Policy (People), Local Government Association	<a href="#">QQ 12–17</a>
*	John Pearce, Vice-President, Association of Directors of Children's Services (ADCS) and Corporate Director, Children and Young People, Durham County Council	<a href="#">QQ 12–17</a>
*	Dame Rachel de Souza, Children's Commissioner for England	<a href="#">QQ 18–22</a>

We also heard anonymously from young people with care-experience

### Alphabetical list of witnesses

	Rose Akinsulire, Peer Leader Peer Power ( <a href="#">QQ 8–11</a> )	
	Cathy Ashley, Chief Executive, Family Rights Group ( <a href="#">QQ 8–11</a> )	<a href="#">CSC0004</a>
	Catherine Barker, Head of Development, Family Hubs Network	<a href="#">CSC0008</a>
*	Sally Burlington, Director of Policy (People), Local Government Association (LGA) ( <a href="#">QQ 12–17</a> )	<a href="#">CSC0009</a>
	Dr Samantha Callan, Director, Family Hubs Network	<a href="#">CSC0008</a>

- ★ Anne-Marie Douglas, Chief Executive Officer /  
Founder, Peer Power Youth ([QQ 8-11](#))
- Lucy Farrell, Senior Account Executive, WA Comms,  
Children's Services Development Group (CSDG) [CSC0005](#)
- ★★ Joe Lane, Head of Policy and Research, Action for  
Children ([QQ 8-11](#)) [CSC0002](#)
- ★ Anne Longfield CBE, Chair, Commission for Young  
People, former Children's Commissioner for England  
([QQ 1-7](#))
- ★ Josh MacAlister, Chair, What works for children's  
social care and former Chair, Independent Review of  
Children's Social Care (IRCSC) ([QQ 1-7](#))
- ★ John Pearce, Vice President, Association of Directors  
of Children's Services and Corporate Director,  
Children and Young People, Durham County Council  
([QQ 12-17](#))
- Nicola Smith, Senior Policy Adviser, Barnardo's [CSC0003](#)
- ★ Dame Rachel de Souza, Children's Commissioner for  
England ([QQ 18-22](#))
- Sam Turner, Head of Policy and Public Affairs,  
Kinship [CSC0001](#)

We also heard anonymously from young people with care-experience.

### APPENDIX 3: ANONYMISED SUMMARY OF ENGAGEMENT EVENT WITH YOUNG PEOPLE WITH CARE-EXPERIENCE.

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On 19 April 2023, the Committee held a virtual engagement event with care-experienced young people. The event was supported by the Children's Commissioner's Office, Coram Voice, and Peer Power. The Committee identified six questions for the young people, and these were shared in advance.

#### Box 6: Discussion points

1. Can you tell us a little about yourself and your experience with the social care system?
2. The Government is looking at changes to how kinship care, where young people live with a relative, works. What should they be doing? What about foster care?
3. In your experience, have the people making decisions about your care considered your needs and wishes? How can we make sure that this always happens?
4. Can you tell us a little bit about your experiences of local authorities and their staff? When have you had good experiences and when haven't things worked well?
  - Possible areas to cover: complexity of care system; young people dealing with a lot of different local authority staff and what this is like; positive experiences; staff spending enough time with young people and families and knowing enough about their lives.
5. How well do you feel the government listens to young people? Would you know how to make your voice heard?
  - Possible areas to discuss: awareness; how easy is the strategy to understand/respond to; whether the young people are aware there is a version written for young people; kinds of questions the consultation asks; support from government/charities/peer groups in developing responses; trust/belief that the government are interested and will consider their views.
6. We're going to be making recommendations to the government about what needs to change in the care system for children and young people—is there anything else you'd like to tell us?

The event comprised of an introduction by the Chair followed by four virtual 'break-out' groups, each chaired by a Member of the Committee.

The names of attendees have been removed to protect their identities. Attendees have had sight of this document to ensure that identifying details are removed.

The attendees were young people who had had a variety of experiences with the care system. These included being placed to live with relatives (kinship care), living with foster families, living within residential care homes, and living in secure units; and, in many cases, a variety of the above.

We have not sought to tell their stories, or to explain what has led to these young people entering the care system. It would be irresponsible to do so in this context. We have instead summarised key themes emerging from the discussions.

## Experiences of different placements

### *Lack of stability*

1. Several attendees reported that there were regular moves in their placements, whether this be kinship care, foster care, or within a children's home. One attendee said they had been in over 100 placements, but while this was unusual many attendees referred to around four-ten placements. One attendee had "moved around quite a bit, [I] never stayed in one place for more than six months ... none of it ever worked out". This had not been their choice; the social workers had continued moving them.
2. Some were moved from the city to the countryside, and one reported being moved four times in ten years. "I had no consistency" said one young person. Attendees described moving through placements, social workers, and no feeling of stability. Others described a constant changeover of their social workers, with one young person describing "going through them like tic tacs."

### *Place*

3. One participant noted that remaining within the same local authority had been helpful, as they had known the information about the young person throughout the process. Others referred to place as a stabilising factor, saying, "I still live where I've always lived", and noting that support networks in terms of friends and social life were important to them.
4. Many were not, though, able to remain in their place: there had been no foster carers available in some areas. One young person had been sent to the countryside from the city: this had a significant impact as their previous experiences were very different, and they had not felt accepted by the community. Moves far away from home were common among our participants: these were described as very stressful. They also disrupted education, one attendee had had a 30-mile round trip to school every day during exam periods.
5. It was noted that, in cases where there had been abuse or mistreatment, it may not in the best interests of the young person to be placed close by their families.

## Adults not always suitable for their role

### *Support required*

6. Many attendees had had difficult experiences in their care placements. There were very strong calls for additional support and care for all the adults involved in the care of young people. This included additional support for kinship carers, foster carers, social workers, and care home staff. Nearly every attendee mentioned the need for additional support in some format.
7. Support available for foster carers was repeatedly contrasted with a lack of support for kinship carers, and there was a very strong call for more support for kinship carers. We were told that kinship carers do not usually have a social worker, training or support, but that this was needed, particularly for when a young person had experienced trauma. One young person reported their kin being told: "if you can't look after her, put her in care".

8. Attendees noted that carers (both foster carers and kinship carers) did not always know how to handle situations common with trauma. Examples were given of how young children can struggle with potty/toilet training; and where different disciplinary approaches might be needed.
9. Lack of money was noted more than once as a prohibiting factor in kin being unable to look after young people. The families had struggled with money, including for beds for the children. Young people were rarely asked to look after their relatives, which some attendees thought was a missed opportunity: with the right support they could have been good carers.

#### *Kinship carers*

10. Several young people noted that their biological families had not been suitable carers for them. At least three attendees had been placed with relatives who had allowed visits from other family members, including the people they had been removed from. This may have placed them in danger. Several attendees had been abused by family members with whom they were placed. One young person described abuse from a parent, which continued when they were placed with the grandparent. They said: "That should have never happened," and noted it had been a difficult choice for the kin, who was placed in a position of having to choose between child and grandchild. This grandparent had also mistreated the young person, along with other children for whom they acted as a foster parent.

#### *Foster carers*

##### *Foster home placements*

11. Some attendees noted that there were barriers to becoming a foster carer, including that they should be available 24 hours per day, which is difficult to combine with a job. For that reason, many pensioners are targeted to become foster carers. It was noted that any targeting towards younger foster carers would need to consider finances and timing.
12. Some attendees had found living with foster families with lots of children very difficult, as the carers may not have the resources or the time to spend with the child.

##### *Experiences in foster care*

13. One young person said of their foster placements: "some good, some bad", and experiences of foster carers had been mixed. There had been some good experiences (this was several times referred to as "luck".) One attendee described being "very lucky to have a good placement on my first try" and noted that her personal history had been considered in detail when identifying a suitable foster home. Others noted strong relationships with foster carers they had got on well with. Several participants had become very integrated and embedded with their foster families.
14. More than one participant had, in foster care, been effectively confined to a bedroom for long periods. Others had not been able to access a locked fridge, or had had the house locked to them.
15. Attendees noted the importance of social services being willing to listen to their experiences with foster carers, to ensure that other children are safe in the future, and to prevent people being allowed to continue fostering where



this was necessary. One foster carer had been abusive, but “they didn’t want to think that she was treating me the way she was ... they’d have to look through thirty years of files ... so easier to say that this didn’t happen”.

16. Many attendees thought that further checks were needed on the suitability of a carer, and that they should be monitored. This was not always because they posed a danger, but because they may not match well: one young person had suffered with bulimia but was placed with a foster carer who had a phobia of vomit.

### *Social workers*

17. Some young people had had very poor experiences with social workers. One had nothing positive to say about their social workers (after their first): they described social workers as being there just to tick a box.
  - One attendee recalled crying in a car on the way from the family home to their first foster placement, and that the social worker had not engaged with them at all. They described this as “bang out of order” in an extremely stressful and traumatic situation.
  - One noted that a social worker had been checking in on them regularly, but that this was unwelcome and the child did not wish to engage with them.
  - One said, “I’ve had some proper funny social workers”.
  - One young person had been living with a relative who was unengaged with them and said that: “I was off doing my own thing all the time ... my social worker never really cared or clocked on”.
  - One young person told the social worker of abuse in a foster home: the social worker stopped taking notes and did not support them.
18. There was also repeated reference to turnover of social workers: there was a lack of consistency and stability when social workers changed repeatedly, and young people reported a lack of consistent relationships throughout their lives. Young people had sometimes not received explanations when their social worker had left and had sometimes not known who the replacement was. This had meant that the young person had to explain their situation repeatedly, and that social workers would come in without knowing their names, which had felt to them like a lack of care.
19. One attendee thought that a greater diversity of experience among social workers would equip services better to meet the needs of children from all cultures. The example given was that social workers who are white may not always be able to assess abuse in a household from a different background: abuse can look different in different cultures.
20. Some participants felt that the social workers engaged more with parents than young people.
21. Poor experiences were not universal: some attendees had found their contact with social workers positive: one young person had been supported in her interests and ambitions, and had not realised that the worker had had more than one family to work with as “she was that good”.
22. Attendees noted that social workers had a challenging job, and thought they needed incentives and support to do their best. One felt that their social worker had been miserable, and did not want to be there: this had passed

onto the child. Another attendee said that they recognised social workers as overwhelmed, especially in light of the amount of traumatic experiences they were handling, and said that they were not able to provide the best quality of care, nor did they have the time available to bond with the young people. We were told that social workers “have managers, directors and all of this other stuff going on that is limiting what they can do”; and we were told of one being dismissed from their job for going outside their working hours to help a suicidal child.

### *Residential homes*

23. There were some comments about very good experiences in certain kinds of residential homes: at least one attendee had had an extremely positive experience.
24. Residential homes were, by most attendees with experience of them, referred to as very clinical and as having a lack of flexibility: “this is policy, this is policy, this is policy”. We were told that, in a home, young people are very much on their own. One resident referred to watching the television show Tracy Beaker (who lived in a residential home), which had worried them about what would happen to them, and another noted that they were “marketed as the last resort.”
25. Attendees talked about homes feeling like a “prison” and being “inhumane”. They variously described staff in the homes as “mean”, retaliatory, “abusive”, and “physically confrontational”. Attendees reported abuse in the homes, both between the children (who might be placed with young people who behaved in hostile and sometimes discriminatory ways), and that the male staff would sometimes be too friendly with the girls.
26. There was often, we were told, a miscommunication between the home managers and the social workers about what the young person was allowed to do.

### *The role of caring relationships*

27. We were told that “homes should be built on love, but not everyone knows what love is.”
28. Participants emphasised the need to listen to young people and what they wanted, and seeing them as a full person, “I am a person not a number”. Another noted: “Obviously everyone cares in different ways. It’s very important to actually fully understand human needs.” Positive examples of care were very important to the young people: one recounted a foster carer bringing her a balloon and a card when she was hospitalised, which had made a “massive difference”. A common theme, though, was that some foster carers had not been “caring”. One thought that the attitude of their foster carers had been: “I don’t get paid enough for this kind of thing”. Another said: “You really do see who is paid to care and who actually cares and they get paid as a bonus.”
29. Several young people were unable to remain with their siblings due to lack of available options. Most attendees believed it would have been much better to remain with siblings.
30. Turnover of social workers, or changes in placement had prevented caring relationships from developing: these relationships needed time.

31. One attendee noted that nobody could ever compensate for a child not being in a happy, loving environment. They said that some shopping trips were offered, when what was needed was people that care, and another young person noted they had received £70 per month for clothes in a residential home, which they thought could warp perceptions of money.

*Perceptions of care-experienced young people*

32. Some attendees referred to negative perceptions held by social workers about young people in the care system: they “had it in their head going in what it was going to be like”.
- One young person who was pregnant had been told by their social worker that she “might as well just get an abortion ... she told me it'd be for the best.” (She spoke with pride of becoming a good parent to her child despite the system.)
  - Some attendees felt that their files did not reflect their positive achievements or traits: “If I got arrested tomorrow, that would go down on my file. But if I spoke in parliament, that wouldn't go down on my file. Going to uni is the only thing that has been put down on my file which is positive.” They felt that negative things were attributed to them, but that the local authority had taken credit for their achievements.
33. One attendee thought that foster carers tended to have a negative view of the young people in their care, and low expectations for them: “Don't get pregnant, don't go to jail.” Another young person noted that they felt they were under a microscope in their foster home, with every aspect of their life being gone through with a fine-toothed comb. Others had felt obligated to their foster carers and been told to allow them to take control of the situations: one had been told that they could not leave the home without their carer for six months.

*Listening to the views of children*

34. There was a common theme that children had not felt listened to in decisions about their care. One attendee noted that while they had asked her what she wanted, it had not been a question which would lead to any change in outcome: “I feel that was completely dismissed, everything was already decided”. Another said, “noone really listened or asked what I wanted”. Another was asked whether there were people to speak to, to raise concerns: “not really, no.” Another had been bullied, which was having a significant impact on her education, but this was not addressed.
35. We were told that in some cases reports of abuse had not been believed or responded to. Staff had not believed young people until bruises had been apparent. A lack of believing young people had prevented a relationship of trust developing between young person and social worker: “when you are finally honest it gets thrown back in your face ... there's no trust to build on”.
36. Several young people noted that their views had changed over time, and now noted that what they had wanted for themselves would not have been right for them.

*Understanding/communicating what is happening to them*

37. Attendees spoke about the importance of knowing what was going to happen in their lives. We heard, though, that young people often did not understand

their situations because it was not explained to them: “you don’t get explained what being in care is ... you’re left in the dark”. One participant said they had been taken to a fast food outlet, “ ... maybe once a month but no explanation about what care actually was—or that we were even going through a care process.”

38. Examples of the situation this can leave young people in were given. Several participants had had the same experience of being told of a move with little or no warning, and of being put into a car with no information.
  - Upon a move to a foster home, one participant had received no information on the foster carers, who she thought had also had no information on her. This led to an “awkward” situation of “walking into some strangers house ... they didn’t know that I was coming ... ”
  - Another said of their move to a foster home: “I was just thrown in there ... didn’t know who it was”.
  - Another said: “I was told very last minute, sometimes on the same day”.
  - At least three separate attendees were put in a car with no warning or information. One had been told to “get in the car” with a stranger, without knowing who they were or why they were relevant to them.
39. There had been little explanation for why a social worker had changed; and in some cases a failure to tell the young person this had happened, leaving them in a situation where they did not know who their social worker was.
40. It was noted that communication often improved once the young person was in care, rather than with their family.

### *Advocacy*

41. Participants told us that they were often assigned personal advisers, who were often better than social workers. In addition to that there were Independent Reviewing Officers and advocates, who should be listening to the views of the young people to the age of 18.
42. There were difficulties in making complaints: young people did not know how to make complaints, and procedures were not accessible. One young person was told to complain to the person the complaint was about.
43. Young people did not always know their rights, and some attendees felt strongly that communicating these should be the role of an advocate, particularly in cases where courts are making decisions.
44. One young person felt that every local authority should have an independent advisory board, made up of social workers, foster carers, kinship carers, and young people on an equal footing. This could hold the authority to account and have its recommendations enacted.

### **Other services**

#### *Schools*

45. Some attendees noted that their schools had reported their situation to social services, and in one case had been “brilliant”. In at least one case, nothing had come of reports of poor treatment at home. Schools, where they were mentioned, were generally seen as being supportive, but patchily so, and that

this was sometimes related to academic achievement. Those young people who had had to change schools had not had the opportunity to develop consistent relationships and bonds with adults in the schools.

46. One student had been told they were unable to attend a school trip because they had an “unstable living situation”, but the money for the trip was not refunded.

### *Mental health services*

47. Attendees did not think that child mental health services met the need they experienced. They said that mental health support and counselling is “something you’ve got to do continuously”, and that weekly contact from a therapist or nurse “should be the basic services”. Generally, though, we were told that mental health support was only available in crisis situations. Support “just doesn’t exist. You can’t get the support unless you’re in that critical condition, unless you tick all the boxes for a urgent referral ... you don’t get those services. They may be there and we’re told you can get access to them, but they’re not.”
48. We were told there were long waiting lists and that sometimes the advice from helplines was unhelpful (one caller had been told to take a bath). One young person noted that they “Hated CAMHS. Weren’t great at all with me.”

### *Transitioning out of care*

49. The experience of care ending at the age of 18 was viewed by several attendees as very difficult and disruptive. It made several of them very anxious, and there was a common view that there had been no support past the age of 18. After that point, young people were not able to reach their support workers. There was mention of a “cliff edge”, and one young person said, “I feel like they’ve just dropped me and I don’t exist”.
50. Some referred to a push, or pressure to leave foster care at the age of 16, to move into independent living and “learn about being an adult.” Several noted that most young people did not leave home at that age, and said: “It’s quite a lot to expect us, who have the added trauma and the added difficulties to go ‘oh you’re out now’”. Another said they would “have to think about things no one my age would think about”. One young person had asked their personal adviser (PA) whether they would think it was acceptable for their child: the PA had got angry, and the young person was left feeling second class.
51. It was noted how difficult living independently was at a young age. For at least one young person, this change had happened with very short notice and at a difficult time for them. Some stated a need for educating them in basic life skills if they were expecting people to live independently, and that further support hubs would be required to avoid a cliff edge. One attendee referred to a case where a girl took out lots of loans at ages 16-17 to live alone, but then had to drop out of university as their bursaries were going towards those debts.
52. One young person described the “trap of supported living”. They had been provided with a studio flat, with no sunlight, and noted that they could not afford to work full-time as the rent would have risen: “if you do work full time you end up homeless.” Similarly, another had found her housing difficult

because of the area. When she left, due to her mental health, she was deemed “intentionally homeless”, and therefore ineligible for allowances, and told: “because you’re independent we’re going to close your case”. Supported living was described as an “impossible cycle” of people getting stuck in their supported housing “for years and years”.

53. The *Shared Lives* and *Stay Put* programmes were noted as positive in that they aimed to continue support for people throughout young adulthood and beyond, but they limited in the first case for adults with disabilities and in the second for those in full time education.

### The future

54. Several of the young people we spoke to were now working with young people, as social workers themselves, having reached that point via apprenticeships or internships. Others were at university, studying to get there, or at college. Some were lawyers, or public servants.
55. They had all had very difficult paths to reach these points. Unanimously, they spoke of wanting to make things better for other young people.
56. We were privileged to meet them.