

Thurrock: A place of opportunity, enterprise and excellence, where individuals, communities and businesses flourish

Cabinet

The meeting will be held at **7.00 pm** on **10 January 2018**

Committee Rooms 2 & 3, Civic Offices, New Road, Grays, Essex, RM17 6SL.

Membership:

Councillors Robert Gledhill (Chair), Shane Hebb (Deputy Chair), Mark Coxshall, James Halden, Deborah Huelin, Brian Little, Susan Little and Aaron Watkins

Agenda

Open to Public and Press

	Page
1 Apologies for Absence	
2 Minutes	5 - 16
To approve as a correct record the minutes of Cabinet held on 13 December 2017.	
3 Items of Urgent Business	
To receive additional items that the Chair is of the opinion should be considered as a matter of urgency, in accordance with Section 100B (4) (b) of the Local Government Act 1972.	
4 Declaration of Interests	
5 Statements by the Leader	
6 Briefings on Policy, Budget and Other Issues	
7 Petitions submitted by Members of the Public	
8 Questions from Non-Executive Members	

9	Matters Referred to the Cabinet for Consideration by an Overview and Scrutiny Committee	
10	A Sustainable Children's Social Care System for the Future: Annual Public Health Report 2017 (Decision 0110452)	17 - 128
11	Local Council Tax Scheme (Decision 0110453)	129 - 134
12	South Essex 2050 (Decision 0110454)	135 - 150
13	Extension of Home to School Transport Contracts (Decision 0110455)	151 - 168
14	Medium Term Financial Strategy Update (Decision 0110456)	169 - 180
15	Lower Thames Crossing Task Force Update Report (Decision 0110457)	181 - 220

Queries regarding this Agenda or notification of apologies:

Please contact Kenna-Victoria Martin, Senior Democratic Services Officer by sending an email to Direct.Democracy@thurrock.gov.uk

Agenda published on: **2 January 2018**

Information for members of the public and councillors

Access to Information and Meetings

Members of the public can attend all meetings of the council and its committees and have the right to see the agenda, which will be published no later than 5 working days before the meeting, and minutes once they are published.

Recording of meetings

This meeting may be recorded for transmission and publication on the Council's website. At the start of the meeting the Chair will confirm if all or part of the meeting is to be recorded.

Members of the public not wishing any speech or address to be recorded for publication to the Internet should contact Democratic Services to discuss any concerns.

If you have any queries regarding this, please contact Democratic Services at Direct.Democracy@thurrock.gov.uk

Guidelines on filming, photography, recording and use of social media at council and committee meetings

The council welcomes the filming, photography, recording and use of social media at council and committee meetings as a means of reporting on its proceedings because it helps to make the council more transparent and accountable to its local communities.

If you wish to film or photograph the proceedings of a meeting and have any special requirements or are intending to bring in large equipment please contact the Communications Team at CommunicationsTeam@thurrock.gov.uk before the meeting. The Chair of the meeting will then be consulted and their agreement sought to any specific request made.

Where members of the public use a laptop, tablet device, smart phone or similar devices to use social media, make recordings or take photographs these devices must be set to 'silent' mode to avoid interrupting proceedings of the council or committee.

The use of flash photography or additional lighting may be allowed provided it has been discussed prior to the meeting and agreement reached to ensure that it will not disrupt proceedings.

The Chair of the meeting may terminate or suspend filming, photography, recording and use of social media if any of these activities, in their opinion, are disrupting proceedings at the meeting.

Thurrock Council Wi-Fi

Wi-Fi is available throughout the Civic Offices. You can access Wi-Fi on your device by simply turning on the Wi-Fi on your laptop, Smartphone or tablet.

- You should connect to TBC-CIVIC
- Enter the password **Thurrock** to connect to/join the Wi-Fi network.
- A Terms & Conditions page should appear and you have to accept these before you can begin using Wi-Fi. Some devices require you to access your browser to bring up the Terms & Conditions page, which you must accept.

The ICT department can offer support for council owned devices only.

Evacuation Procedures

In the case of an emergency, you should evacuate the building using the nearest available exit and congregate at the assembly point at Kings Walk.

How to view this agenda on a tablet device



You can view the agenda on your [iPad](#), [Android Device](#) or [Blackberry Playbook](#) with the free modern.gov app.

Members of the Council should ensure that their device is sufficiently charged, although a limited number of charging points will be available in Members Services.

To view any “exempt” information that may be included on the agenda for this meeting, Councillors should:

- Access the modern.gov app
- Enter your username and password

DECLARING INTERESTS FLOWCHART – QUESTIONS TO ASK YOURSELF

Breaching those parts identified as a pecuniary interest is potentially a criminal offence

Helpful Reminders for Members

- *Is your register of interests up to date?*
- *In particular have you declared to the Monitoring Officer all disclosable pecuniary interests?*
- *Have you checked the register to ensure that they have been recorded correctly?*

When should you declare an interest *at a meeting*?

- **What matters are being discussed at the meeting?** (including Council, Cabinet, Committees, Subs, Joint Committees and Joint Subs); or
- If you are a Cabinet Member making decisions other than in Cabinet **what matter is before you for single member decision?**



Does the business to be transacted at the meeting

- relate to; or
- likely to affect

any of your registered interests and in particular any of your Disclosable Pecuniary Interests?

Disclosable Pecuniary Interests shall include your interests or those of:

- your spouse or civil partner's
- a person you are living with as husband/ wife
- a person you are living with as if you were civil partners

where you are aware that this other person has the interest.

A detailed description of a disclosable pecuniary interest is included in the Members Code of Conduct at Chapter 7 of the Constitution. **Please seek advice from the Monitoring Officer about disclosable pecuniary interests.**

What is a Non-Pecuniary interest? – this is an interest which is not pecuniary (as defined) but is nonetheless so significant that a member of the public with knowledge of the relevant facts, would reasonably regard to be so significant that it would materially impact upon your judgement of the public interest.

Pecuniary

If the interest is not already in the register you must (unless the interest has been agreed by the Monitoring Officer to be sensitive) disclose the existence and nature of the interest to the meeting

If the Interest is not entered in the register and is not the subject of a pending notification you must within 28 days notify the Monitoring Officer of the interest for inclusion in the register

Unless you have received dispensation upon previous application from the Monitoring Officer, you must:

- Not participate or participate further in any discussion of the matter at a meeting;
- Not participate in any vote or further vote taken at the meeting; and
- leave the room while the item is being considered/voted upon

If you are a Cabinet Member you may make arrangements for the matter to be dealt with by a third person but take no further steps

Non- pecuniary

Declare the nature and extent of your interest including enough detail to allow a member of the public to understand its nature



You may participate and vote in the usual way but you should seek advice on Predetermination and Bias from the Monitoring Officer.

Vision: Thurrock: A place of **opportunity, enterprise and excellence**, where **individuals, communities and businesses** flourish.

To achieve our vision, we have identified five strategic priorities:

1. Create a great place for learning and opportunity

- Ensure that every place of learning is rated “Good” or better
- Raise levels of aspiration and attainment so that residents can take advantage of local job opportunities
- Support families to give children the best possible start in life

2. Encourage and promote job creation and economic prosperity

- Promote Thurrock and encourage inward investment to enable and sustain growth
- Support business and develop the local skilled workforce they require
- Work with partners to secure improved infrastructure and built environment

3. Build pride, responsibility and respect

- Create welcoming, safe, and resilient communities which value fairness
- Work in partnership with communities to help them take responsibility for shaping their quality of life
- Empower residents through choice and independence to improve their health and well-being

4. Improve health and well-being

- Ensure people stay healthy longer, adding years to life and life to years
- Reduce inequalities in health and well-being and safeguard the most vulnerable people with timely intervention and care accessed closer to home
- Enhance quality of life through improved housing, employment and opportunity

5. Promote and protect our clean and green environment

- Enhance access to Thurrock's river frontage, cultural assets and leisure opportunities
- Promote Thurrock's natural environment and biodiversity
- Inspire high quality design and standards in our buildings and public space

Minutes of the Meeting of the Cabinet held on 13 December 2017 at 7.00 pm

The deadline for call-ins is Thursday 28 December 2017 at 5.00pm

Present: Councillors Robert Gledhill (Chair), Shane Hebb (Deputy Chair), Mark Coxshall, James Halden, Deborah Huelin, Brian Little, Susan Little and Aaron Watkins

In attendance: Lyn Carpenter, Chief Executive
Sharon Bayliss, Director of Commercial Services
Sean Clark, Director of Finance & IT
Steve Cox, Corporate Director Place
Roger Harris, Corporate Director of Adults, Housing and Health
Jackie Hinchliffe, Director of HR, OD & Transformation
Rory Patterson, Corporate Director of Children's Services
Karen Wheeler, Director of Strategy, Communications and Customer Service
David Lawson, Assistant Director of Law & Governance
Kenna-Victoria Martin, Senior Democratic Services Officer

Before the start of the Meeting, all present were advised that the meeting may be filmed and was being recorded, with the audio recording to be made available on the Council's website.

58. Minutes

The Minutes of Cabinet, held on 8 November 2017, were approved as a correct record.

59. Items of Urgent Business

There were no items of urgent business.

60. Declaration of Interests

There were no declarations of interest.

61. Statements by the Leader

The Leader welcomed Members and those present to the final Cabinet of the year, in doing so he wished everybody a Merry Christmas and a happy new year.

Councillor Gledhill continued on the topic of Christmas and thanked those who had helped to arrange the Christmas lights switch on events across the borough. He commented he was particularly pleased the CEDF fund was able to assist the Corringham area with their lights this year.

He further commented on the fantastic project of Give a Gift the Council were running in partnership with intu Lakeside. He notified Members he had been told that thousands of hours had been donated by officers, residents, councillors and foster carers to make sure the shop was well-staffed.

The Leader continued to mention the Council had received new enquiries about becoming foster carers, raised thousands of pounds towards the local charity GiFT and received thousands of presents for local children who would otherwise not receive anything. He offered a big thank to all those volunteering, donating and fundraising for our local residents.

Members were then updated on the Clean it, Cut it, Fill it scheme. In doing so Councillor Gledhill highlighted:

- Since April 1288 potholes had been filled;
- 1174 tonnes of rubbish had been collected to date;
- 9,300 acres of Grass had been cut. This had now ceased for the Winter period, however other maintenance would be completed;
- 61,359 bags of litter had been collected; and
- 34,060 bins had been emptied.

In addition, the Leader advised free parking had returned to King Street car park in Stanford Le Hope and thanked Councillors Hebb and B. Little for all of their hard work. He commented that a review would be undertaken in the New Year.

Members heard that the first week in December marked an historic moment for Purfleet, and the Borough, as site investigation works began on the regeneration site. The Leader explained during the first phase the following work would be undertaken:

- A bridge over the railway line to replace the level crossing;
- New road connections;
- Additional school places;
- An integrated medical centre and;
- Improvements to the riverfront walkway.

Finally Councillor Gledhill reminded Members last week was the annual staff awards ceremony. The night was a chance for the Council us to say thank you and recognise the officers who go above and beyond in their service to the borough. He offered his thanks and appreciation to all finalists and winners.

62. Briefings on Policy, Budget and Other Issues

Councillor Hebb addressed Cabinet Members with 3 updates relating to policy and budget.

He started by advising Members that the Council was a record holding authority for the amount of council tax collected each year compared to other Essex Councils, with almost 99% collected. The Portfolio Holder for Finance continued to explain that the debt team was recently independently assessed by the IRRV and was found to be innovative and fair in its approach.

Members heard the Cabinet Member for finance had recently attended a night shift with debt collecting colleagues and had been impressed with their professionalism and approach to collections. It was following this that he was therefore announcing that a Fair Debt Summit would be held in early 2018, with officers of the Debt team, a representative from each political group, and other bodies such as the CAB, being invited to attend.

Councillor Hebb stated the summit would look to do everything the Council could to introduce an even more compassionate service; one to which residents could look to for help. He further mentioned that the summit would also be looking at the furthest reaching measures to make sure that the small segment of people who could afford to pay but refused also paid their dues.

The Portfolio Holder for Finance informed Members he had met with the S151 Officer, the Chief Executive and the Leader of the Council, earlier in the year to discuss the topic of self-sufficiency. He mentioned Public bodies across the country had had to take charge of their own duties to help reduce the national deficit caused by excessive public spending.

He continued by remarking the Council Spending Review had led on a service review programme, fundamentally reviewing services over a three year period. The Council Spending Review, and most recently Cabinet and Council, had approved the Administration's investment approach.

Following this, Councillor Hebb announced the investment approach was on target, not only to balance the budget for 2018/19, but also for 2019/20. .

Lastly the Portfolio Holder for Finance commented on the rainy day fund, stating that when the Conservatives assumed administration, council reserves had sat at £8million for a number of years, and he had made a pledge to increase such reserves.

Members heard that Councillor Hebb had hoped to increase council reserves by £2million, to £10million, in the next few years. He took pleasure in confirming that by March 2018 the council would be increasing its reserves by almost 38%. This meant council reserves would be increased from £8million to £11million.

Councillor S. Little welcomed the update from the Portfolio Holder for Finance, remarking it was brilliant to hear and noting that the Council's reserves were on the up.

Councillor Coxshall commended Councillor Hebb on his update, as the budgets were not only balanced but the Council also had funds to spend on services which required it.

The Leader of the Council observed there could be lots of factors as to why people were unable to their Council Tax, however to simply not pay was unacceptable.

63. Petitions submitted by Members of the Public

The Leader of the Council advised that no questions had been submitted from Non-Executive Members.

64. Questions from Non-Executive Members

The Leader of the Council advised that no questions had been submitted from Non-Executive Members.

65. Matters Referred to the Cabinet for Consideration by an Overview and Scrutiny Committee

The Leader of the Council informed Members that no matters had been referred to the Cabinet by an Overview and Scrutiny Committee.

66. Quarter 2 Corporate Performance Report 2017/18

The Portfolio Holder for Performance and Central Services presented the report to Members explaining it provided a progress update in relation to the performance of Key Performance Indicators (KPIs), including a focus on some specific highlights and challenges.

She continued by stating that 68% of KPI's had been achieved and this had been proven with staff winning awards in different service areas. It was further highlighted that, although eleven focus areas remained failing, there were clear action plans in place meaning the council was in a proactive position.

Councillor Huelin advised Members that results of the recent Resident Survey would be presented at a future Cabinet meeting.

Councillor Hebb commented on the results stating that 68% of KPS's in the green were outstanding. However, as stated, the remaining 32% showed there was still more that the Council could do.

Councillor Halden felt more commentary was required for focus point 7 the percentage of 17-21 year old Care Leavers in Education, Employment or Training. He continued by stating the cohort for new apprenticeships was low with only 2 young people being recruited, therefore the slightest drop in attendance would significantly affect the performance figures.

The Portfolio Holder for Environment congratulated the street cleansing team on their recent win at the staff awards. He continued by stating recycling was at the forefront of the up and coming Environment Strategy and a report was

scheduled for the December Cleaner, Greener and Safer Overview and Scrutiny Committee.

The Leader of the Council stated it was important that Council housing stock was in a fit state before allowing residents to move in therefore he would rather the void target be slightly under target but have liveable properties for residents.

RESOLVED:

- 1. To note and comment upon the performance of the key corporate performance indicators in particular those areas which are IN FOCUS**
- 2. To identify any areas which require additional consideration**

67. 2017/18 Capital Monitoring Report - Quarter 2 (Decision 0110444)

Councillor Hebb, Portfolio Holder for Finance, introduced the report notifying Cabinet that £1.3 million of projects had been delivered under budget. This included savings such as £60,000 for replacing LED street lighting throughout the borough. It was mentioned that £5million had also been profiled into different schemes, such as updating the IT server rooms.

He continued to state that, although the Council was at 26% verses its 30% target, for reasons explained he was happy the Council would be on target by the end of the year.

Councillor Halden welcomed the report, mentioning that good capital monitoring was behind the improvement of delivery of services for residents such as the recent primary school allocations, where most parents received their first place preference.

The Leader of the Council highlighted the LED street lighting project was delivered under budget at a time where other Local Authorities were turning off street lights.

RESOLVED that Cabinet:

- 1. Noted the General Fund capital programme is projected to have available resources of £6.467m as at 31 March 2018 with this funding carried forward to 2018/19 to fund schemes currently in progress;**
- 2. Noted that there is a further £114.868m in the approved programme that is under development and/or dependent on third party actions as set out in paragraph 3.7;**
- 3. Noted that the Housing Revenue Account capital programme is projected to have available resources of £21.040m as at 31 March 2018 with this funding carried forward to 2018/19 to fund schemes currently in progress.**

Reason for Decision – as stated in the report
This decision is subject to call-in

68. Developing a new model of residential care for older people in Thurrock, fit for the 21st Century (Decision 0110445)

The Portfolio Holder for Children's and Adult's Social Care addressed Cabinet explaining the report proposed that consideration be given to the development of a new residential care facility in South Ockendon, with accommodation and services fit for the 21st Century.

Councillor Halden welcomed the report stating these investments were encouraging to see and would support elderly residents for years to come. He continued by further commenting that the Council was working with NHS partners to support and develop the new model of residential care for Thurrock residents.

RESOLVED that Cabinet:

- 1. Approves the strategy outlined in this report for the development of a new residential care facility, fit for the 21st Century, on the Whiteacre / Dilkes Wood sites, in conjunction with Health partners;**
- 2. Agrees that a further report, with detailed funding and development proposals for the construction of the new facility, together with the associated procurement proposals, should be brought to Cabinet for approval in 2018.**

Reason for Decision – as stated in the report
This decision is subject to call-in

69. Treasury Management 2017/18 Mid Year Report (Decision 0110446)

Councillor Hebb presented the report to the Cabinet explaining that the key message from the report was that in the last 6 months the finance team had enabled £2.5 million to be put back into the General Fund, through good treasury management.

The Leader commended the Portfolio Holder of Finance on the report and stated it was pleasing to see the Council was able to return funds to the General Fund.

RESOLVED that Cabinet:

- 1. Commented on the report on Treasury Management activity as at month 6 in 2017/18.**

Reason for Decision – as stated in the report
This decision is subject to call-in

70. Aveley Community Hub Business Report and New Build (Decision 0110447)

The Portfolio Holder for Regeneration reported that previously Cabinet had considered a report on the Thurrock Library Service. The report had outlined that the Council was working closely with Aveley Village Community Forum to progress plans for a new community building.

He continued to comment the £1.7 million project would include a:

- Hall, Common room and Youth Centre
- Hub Office
- Reception with self-serve library facility
- Community Café
- Nursery

Members heard how the project supported essential infrastructure in the area to complement new housing developments. In addition the new medical centre was due to open in Purfleet in 2021. It was clear from the consultation that medical services were high on the list of residents' concerns.

Councillor Halden commended the Portfolio Holder on his report and welcomed the new modern facilities for residents in the Aveley area.

RESOLVED that Cabinet:

- 1. Noted the work completed to date and to support the development of a new building for the Aveley Community Hub;**
- 2. Agree to the Council procuring a building contractor for the scheme and to delegate authority for appointment to the Corporate Director of Place in consultation with the Portfolio Holder for Regeneration, Highways and Transportation subject to budget provision.**

Reason for Decision – as stated in the report
This decision is subject to call-in

71. Primary Care Improvement Plan (Decision 0110448)

Councillor Halden, Portfolio Holder for Education and Health, addressed Members explaining the new strategic approach to improving the diagnosis and management of patients with long term health conditions in Primary Care that had been developed jointly with partners in the NHS.

He continued to advise Members that primary care within the borough was not just about GP numbers. He compared the easy framework offered by Ofsted for primary schools as a framework required for primary care.

The Portfolio Holder for Education and Health stated the integrated medical centres across the borough not only drove improvement but also gave other options for Accident and Emergency services at Basildon hospital.

It was discussed that a scorecard system would be provided to each GP surgery, this would detail any actions required for improvement and would be undertaken by the public health team and Thurrock CCG. Once improvements were made and kept, additional funding from the Better Care Fund would be a possibility.

Councillor Gledhill thanked Councillor Halden for the report and commended the good work as set out at 3.10 of the report.

RESOLVED:

- 1. That Cabinet approves this new strategic programme of performance improvement and support for primary care with linked demand management for hospital and adult social care services, as detailed within the paper.**

Reason for Decision – as stated in the report
This decision is subject to call-in

72. Revenue Budget Monitoring - Quarter 2 September 2017 (Decision 0110449)

The Portfolio Holder for Finance introduced the report which highlighted that the approach to budget management had been reviewed in order to focus attention on high risk areas and introduce a level of self-service for smaller, lower risk budget areas.

He continued to notify Members that the Council Spending Review Panel continued to discuss the 2017/18 budget and reshaping council services. It was stated previously that the Portfolio Holder had reported an expected overspend of £1 million, however this had now been reduced to £475,000, still taking into account significant pressures which had been recognised. Councillor Hebb highlighted work had been undertaken within the children's and environment services following the previously reported pressures within these departments.

Councillor Halden notified Members that the Dedicated Schools Grant, although currently unbalanced, was not subject to funding cuts. He further advised the deficit of grant was a big topic for discussion by the Schools Forum.

The Leader of the Council highlighted that the Housing Revenue Account was on budget, although pressures such as operational costs were still required to be well managed within the service. He further stated that £15 million was

required to be spent on housing stock over the next 30 years to ensure properties for liveable for residents.

RESOLVED:

- 1. That Cabinet comment on the current budget position for 2017/18 and support further mitigation to bring the outturn within the agreed budget envelope.**

Reason for Decision – as stated in the report
This decision is subject to call-in

73. Linford Household Waste and Recycling Centre - Commercial Vehicle Access Policy and Future Site Redevelopment (Decision 0110450)

Councillor Watkins, Portfolio Holder Environment, reported that Thurrock Council operated a single Household Waste and Recycling Centre at Linford. The site was currently operating significantly over capacity and the layout and infrastructure was not in keeping with modern sites.

He notified Members that an independent survey undertaken in June suggested there was a significant degree of commercial waste abuse on-site which was jeopardising the site's environmental permit and creating significant, avoidable waste disposal costs. The Portfolio Holder further explained the introduction of Commercial Permits and advised Members a total number of permitted visits would be allowed within a 12 month period, this would allow visits the site to deposit waste 12 times per year.

The Portfolio Holder for Finance welcomed the report and the redesign of the waste and recycling centre. He continued that levelling off the site would improve the facilities for residents and congratulated the team on their customer service.

Councillor Watkins commented on the redesign principles, highlighting the increase in recycling and re-use facilities on-site would allow for greater opportunities for partnership with local re-use community groups which would then enable a greater number of items such as furniture, bicycles and electrical goods to be re-used.

Members commented that local businesses were likely to welcome the commercial vehicles permit scheme, as this showed investment in the site and better facilities offered.

RESOLVED:

- 1. To note the comments of Cleaner Greener Safer Overview Scrutiny. The reports were in two parts Redevelopment of the Site (12th October 2017) and Commercial Vehicle Access Policy (15th November 2017).**

2. To delegate authority to the Director of Environment and Highways in consultation with the Cabinet Member for Environment to implement a permit based system for site access for Commercial Vehicles and Vehicles towing trailers at the HWRC.
3. To delegate authority to the Director of Environment and Highways in consultation with the Cabinet Member for Environment to undertake Planning Application for the redevelopment of the HWRC Linford, on its current Buckingham Hill site in line with the design principles detailed in 5.3.
4. That Cabinet agree to increase the budget available by £1m to enable the planned works to include changes regarding Trade Waste, based on cost savings from waste disposal and income meeting the increased cost of capital.
5. Subject to planning approval, Cabinet agree to delegate authority to the Director of Environment and Highways in consultation with the Cabinet Member for Environment and the Director of Finance and IT for the procurement of contracts for the redevelopment of the Household Waste and Recycling Centre.

Reason for Decision – as stated in the report
This decision is subject to call-in

74. Voluntary Sector Corporate Grants Programme (Decision 0110451)

Councillor S. Little presented the report to Members, in doing so she explained Thurrock's Voluntary Sector Corporate Grants Programme was an established and recognised source of funding for key, strategic voluntary sector partners supporting communities in Thurrock.

She continued by commending the different groups on the work they completed within the borough and explained the 3 year funding term was welcomed as it enabled the voluntary groups to plan ahead.

Councillor Gledhill welcomed the report and mentioned previous issues had impacted on the voluntary sector, however it pleasing to see an outcome which was agreeable by all parties.

RESOLVED:

1. That the administration of the Voluntary Sector Corporate Grants Programme continues with Thurrock CVS from April 2018 – March 2021 with the option to extend by one year if required.
2. That the process reflects the criteria set out in Section 3.
3. To seek delegated authority for new funding agreements from 2018 – 2021 to be agreed by the Accountable Director for Adults, Housing and Health in consultation with the Portfolio Holder.

Reason for Decision – as stated in the report
This decision is subject to call-in

The meeting finished at 8.33 pm

Approved as a true and correct record

CHAIR

DATE

**Any queries regarding these Minutes, please contact
Democratic Services at Direct.Democracy@thurrock.gov.uk**

This page is intentionally left blank

10 January 2017		ITEM: 10 Decision 0110452
Cabinet		
A Sustainable Children’s Social Care System for the Future: Annual Public Health Report 2017		
Wards and communities affected: All	Key Decision: Key	
Report of: Councillor James Halden, Portfolio Holder for Education and Health		
Accountable Assistant Director: Tim Elwell-Sutton, Assistant Director and Consultant in Public Health		
Accountable Director: Ian Wake, Director of Public Health		
This report is Public		

Executive Summary

It is the statutory duty of the Director of Public Health to prepare an independent report on the health and wellbeing of the local population each year. Last year’s Annual Public Report focussed on the sustainability of the adult health and social care system in Thurrock. This year, the report considers how to create a sustainable children’s social care system for the future.

The report analyses the reasons for growing pressure on the system, produces new forecasts for future demand, and makes a series of specific recommendations for making the system more sustainable. In particular, it sets out the need for a radical shift of focus towards services which reduce demand and prevent children from becoming looked after.

As part of creating a sustainable children social care system, Public Health has been working to support the wider work of the Children Services Directorate. Our work programme has encompassed a range of activities including the service transformation work within Brighter Futures; integrating both commissioning and direct delivery of public health, education and children’s social care services within Children’s Centres and developing a comprehensive single health and wellbeing ‘offer’ to schools. Our plans for 2018 including a schools’ based Children and Young People’s Mental Health Joint Strategic Needs Assessment (JSNA) product, that will inform a mental health improvement programme for children and young people and a Schools Based Mental Health Summit.

1. Recommendation(s)

1.1 That the contents and recommendations of the report be noted by Cabinet.

1.2 That Cabinet approve to hold a Mental Health summit to address emotional and mental health issues which contribute to the wider health and wellbeing issues amongst young people.

2. Introduction and Background

2.1 One of the main goals of Thurrock's Health and Wellbeing Strategy is to make Thurrock a place offering "Opportunity for All". Central to this goal is making Thurrock a place where children can flourish and achieve their full potential in life.

2.2 It is increasingly understood that poor experiences in childhood can create intergenerational cycles of deprivation and poor health. People who have multiple adverse childhood experiences are also more likely to make poor educational progress, have unplanned pregnancies and be unemployed. This in turn can have a negative impact on their parenting ability, perpetuating the cycle across generations.

2.3 Pressures on social workers and the whole social care system are growing each year. There is evidence that a growing number of families and children are coming into contact with the social care system. The reasons for this have not been well understood but the pressures on the social care system are clear: social workers are increasingly over-burdened and the cost to the council is growing.

2.4 Furthermore, it is clearly evident that children who have access to the social care system face increasing mental health and wellbeing need. The 2016/17 Brighter Futures Survey highlighted issues such as bullying, stress and online safety as major areas of concern for Children and Young People. These issues also contribute to the wider health and wellbeing issues currently faced by young people more so by children in care.

2.5 The work programme with Public Health and Children's Directorate include a proposal to hold a high-profile Mental Health summit, led by the Portfolio Holder for Education and Health, bringing together representatives of key stakeholders including: children and young people's representatives; schools and the wider educational settings; service providers; the CCG; voluntary sector, council officials and elected members. This summit will be an opportunity to showcase to partners a new joined-up approach to addressing Children and Young People's mental health and wellbeing and its contributory factors in Thurrock.

3. Issues, Options and Analysis of Options

3.1 These are set out in detail in the report itself.

4. Reasons for Recommendation

4.1 This report fulfils a statutory duty of the Director of Public Health (Health and Social Care Act 2012). The specific recommendations contained in the report arise from a detailed analysis of local and national data, as well as a thorough review of evidence about what works in children's social care.

5. Consultation (including Overview and Scrutiny, if applicable)

5.1 A wide range of stakeholders were consulted and contributed to this report. These are set out in the acknowledgements section of the report. No other consultation has taken place.

6. Impact on corporate policies, priorities, performance and community impact

6.1 The report makes the case for a strategic shift in investment within Children's Services towards services which reduce the number of children who require social care intervention. The analysis presented in the report suggests that unless this is made, there is a risk that spending in the high-cost part of the system (Looked After Children) will become increasingly unsustainable.

6.2 The result of following the recommendations would be a gradual easing of pressure on the children's social care system, with fewer children becoming looked after.

7. Implications

7.1 Financial

Implications verified by: **Jo Freeman**
Management Accountant

The report looks at potential future demand for children's social care. Future forecasting suggests that there is a risk of the costs of Looked After Children increasing by up to £6m per year by 2027 unless action is taken to manage effectively. The report also outlines a number of opportunities to manage demand and recommends a strategic shift in investment towards preventative services. The report makes a number of specific recommendations about invest-to-save opportunities in this area. For example, a new edge of care service which prevents 22 children from entering care each year could save the council £1.2m per year though this is an estimate only and would need to be quantified in more detail before an investment decision is made. Specific investment decisions arising from the recommendations in this report would

be subject to the approval of detailed business cases for individual services and these would be approved through the normal governance processes.

7.2 Legal

Implications verified by: **Lindsey Marks**
Principal Solicitor Children's and Adults'
Safeguarding

There are no legal implications. This report has been prepared in accordance with the statutory duties of the Director of Public Health.

7.3 Diversity and Equality

Implications verified by: **Natalie Warren**
Strategic Lead: Community Development and
Equalities

The report outlines evidence that ethnic minority families are over-represented in the children's social care system. The recommendations made in this report would reduce or prevent the escalation of social care cases and help to address this imbalance.

7.4 Other implications (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder)

None

8. Background papers used in preparing the report (including their location on the Council's website or identification whether any are exempt or protected by copyright):

- Detailed references are given in the main report.

9. Appendices to the report

- Appendix 1 - Annual Public Health Report 2017: Executive Summary
- Appendix 2 - Annual Public Health Report 2017: Full Report

Report Author:

Tim Elwell-Sutton

Assistant Director and Consultant in Public Health

A young girl with brown hair, wearing a red shirt, is smiling broadly. Next to her, a young boy with short brown hair, wearing a blue shirt, is focused on driving a toy car. The background is a colorful, blurred setting, possibly a play area or a fairground.

A Sustainable Children's Social Care System for the Future

Page 21

Annual Report of the Director of Public Health 2017
Executive Summary

Index

Foreword.....	2
Why focus on children’s social care?.....	3
Strategic recommendations.....	4
Financial challenges and opportunities.....	5
How the children’s social care system works.....	6
Key questions addressed in this report.....	7
What are the pressures? Is the number of children in the system rising?.....	8
What are the pressures? Budget and spending.....	9
Why are numbers rising faster in Thurrock than elsewhere?.....	10
How many children are likely to be in the social care system in future?.....	14
How can we reduce the number of children in the system?.....	15
Acknowledgements.....	19

Page 22

Abbreviations

Abbreviation	Full form
CFAT	Child and Family Assessment Team
ciN	Child in Need
CPP	Child Protection Plan
LAC	Looked After Child
MASH	Multi-Agency Safeguarding Hub
NICE	National Institute for health and Care Excellence
PASS	Prevention and Support Service
SEND	Special Educational Needs and Disabilities

A copy of the full version of this report is available on the Thurrock Council website at:
<https://www.thurrock.gov.uk/healthy-living/health-statistics-and-information>

Foreword

Public Health as a professional discipline encompasses a unique skill set that includes epidemiological expertise such as the quantification of need, demand and supply, the assessment of evidence, and the predictive modelling of health and care systems. In the UK these skills have historically been applied to healthcare systems in order to assist the NHS to commission and deliver more efficient, effective and equitable health services. However the move of public health to local authorities has presented opportunities for these skills to be applied more widely.



My Annual Public Health Report last year used this public health skill set in answering the question, 'what would make our adult health and care services more sustainable in financial and operational terms?' By mapping how our residents, and the funding that accompanies their journeys, flow through different constituent organisations, we were able to understand how clinical and professional practice in each organisation impacted on the system as a whole. This led to a series of recommendations to reduce demand for the most expensive and high intensity interventions by improving clinical practice 'upstream' in primary and community care to prevent avoidable events such as strokes, heart attacks and falls. The findings and recommendations within the report were seized upon by our local clinicians and system leaders, and have resulted in a comprehensive programme of system transformation and improvement that will ultimately lead to a new Accountable Care Partnership for Thurrock, reduced demand on local hospital and adult social care services, and demonstrable improvements in the health of our population.

This year I asked my team to apply the same skill set to children's social care services, with a view to answering a similar question: how can we make our children's social care system financially and operationally sustainable, and more effective? There were two reasons for my choice of topic. Firstly, it has long been known that children and young people who enter the care system typically experience poorer health and wellbeing outcomes than those in the general population. Experiencing care as a child or young person is associated with poorer educational attainment, poorer mental health, an increased risk of teenage parenthood and an increased likelihood of entering the criminal justice system. Indeed children and young people who become 'looked after' by the state experience some of the worst health inequalities of any group in society. Secondly, demand on children's social care services is increasing at an unsustainable rate both nationally and locally. Modelling famously done in the London Borough of Barnet suggested that if action is not taken to address this, local authorities will need to spend their entire budget on social care by 2025.

This report aims to understand our local children's social care system, the factors that are driving demand and most importantly, the actions that we can take to address that demand and improve health and wellbeing outcomes for the children and young people we care for. The work has been led by Tim Elwell-Sutton, Consultant in Public Health and his team and I commend it as one of the highest quality and most detailed pieces of public health practice in this field. I trust that the findings and recommendations contained within the report will be useful to colleagues in children's social care in understanding our care system, and will continue the conversation on how we improve that system and the life chances of children and young people who enter it in the future.

Ian Wake

Director of Public Health, November 2017

Why focus on children's social care?



Page 24

One of the goals of Thurrock's Health and Wellbeing Strategy is to make Thurrock a place offering "Opportunity for All". This means making Thurrock somewhere children can flourish and achieve their full potential in life. We now understand better than ever before that distressing experiences in childhood are linked to poor health and wellbeing throughout life.

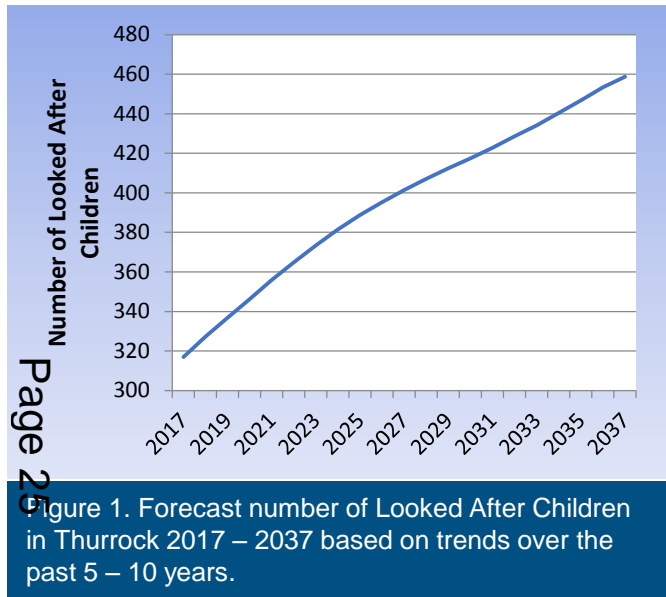
It is also increasingly understood that poor experiences in childhood can create intergenerational cycles of deprivation and poor health. People who have multiple adverse childhood experiences are more likely to make poor educational progress, have unplanned pregnancies and be unemployed. This in turn can have a negative impact on their parenting, perpetuating the cycle across generations.

The role of the children's social care system is to ensure that all children have the opportunities they deserve and that, when things go wrong, children are kept safe. Children's social workers have not traditionally been considered part of the public health workforce yet their work has at least as much impact on the health and wellbeing of some children as that of health professionals.

Pressures on social workers and the whole social care system are growing each year. Last year's Annual Public Health Report considered ways in which the adult health and social care system could be made more sustainable. This year, we consider the children's social care system, the pressures on it, and how we can create a system which gives every child in Thurrock the best possible start in life.

...poor experiences in childhood create intergenerational cycles of deprivation and poor health... social workers have at least as much impact on the health and wellbeing of some children as health professionals.

Strategic Recommendations



Unless action is taken to upgrade services which reduce demand, the cost of children's social care could become increasingly unsustainable. Work is already underway to make address this risk.

1. Make a long-term strategic commitment to invest in prevention

A high-level strategic commitment must be made to re-balance investment towards preventative activities. In recent years investment in preventative services has been eroded whilst spending on high-cost care placements has increased. By rebalancing investment towards preventative services, we can prevent children from ending up in care unnecessarily and, over time, relieve financial pressures on the social care system. This rebalancing has already begun but must be continued over the long-term to ensure sustainability.

2. Invest in the most effective preventative services

Making a strategic commitment to invest in prevention will only be effective if that investment is made in the right areas. We give specific recommendations about where to invest across the social care system and, where possible, we have made estimates of the cost-savings which would result from these investments.

3. Improve information on activity and spending

Reducing the number of children in the system and controlling costs can only be achieved if reliable activity and financial information are available, allowing us to understand current patterns of activity and spending. We make specific recommendations about how to improve our understanding of activity and spending.

Financial challenges and opportunities

Challenges

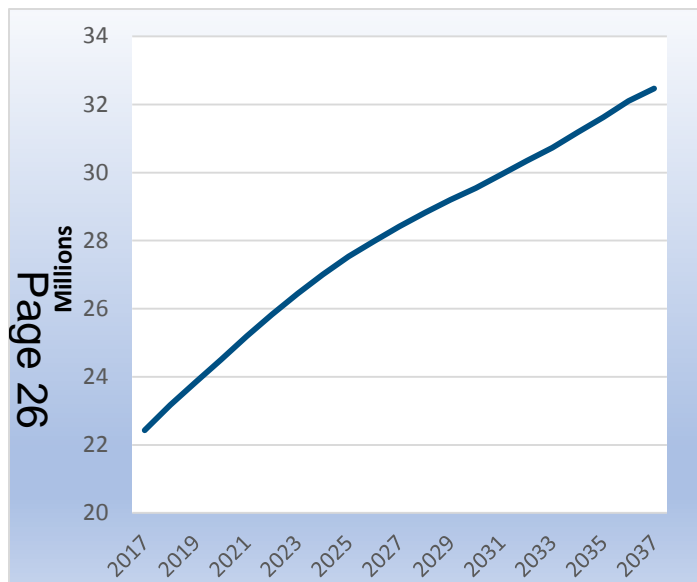


Figure 2. Forecast cost of Looked After Children in Thurrock 2017 – 2037 based on the past 5 – 10 years

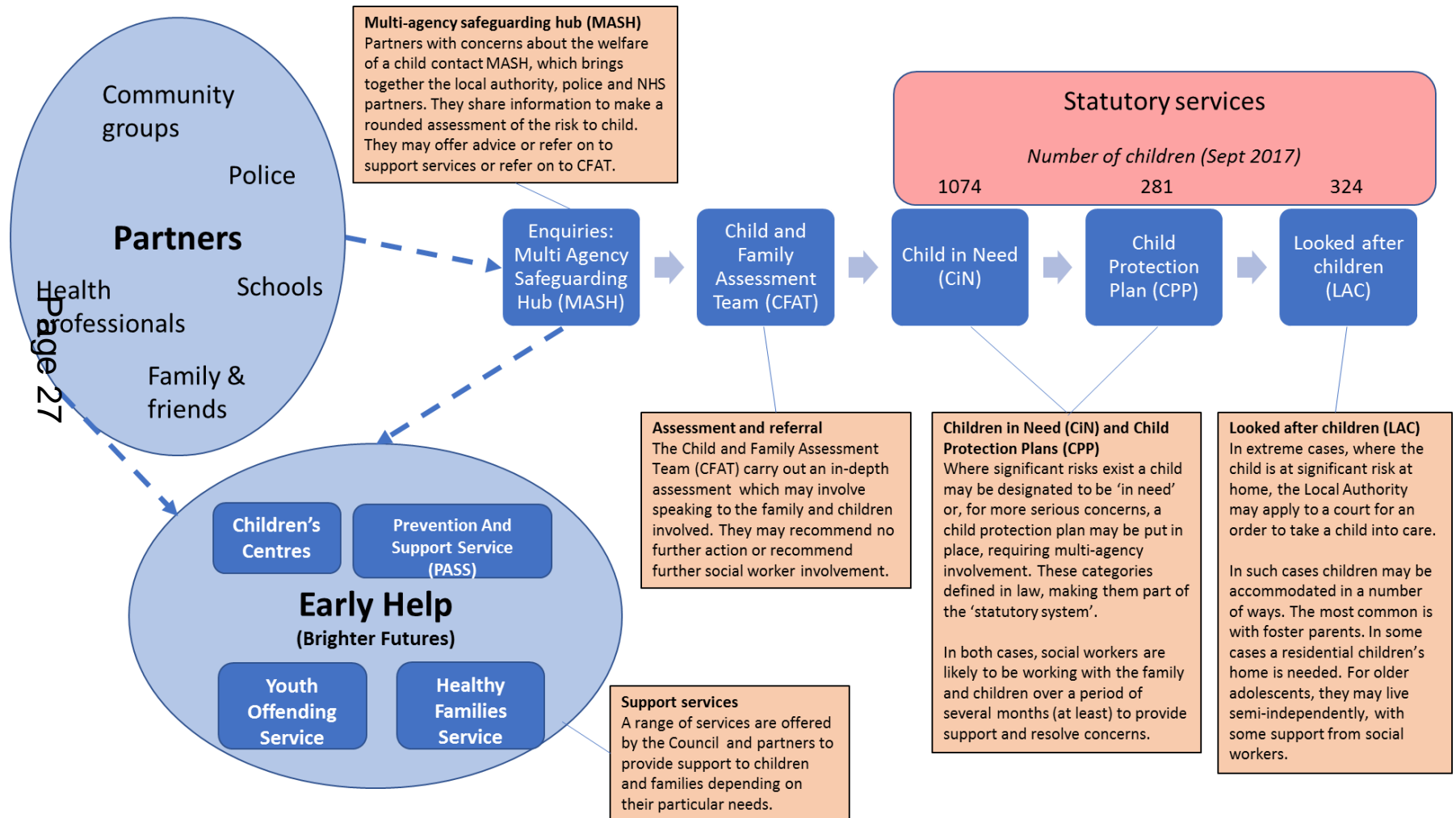
Based on trends over the past 5 – 10 years, we estimate that the annual cost of Looked After Children alone could rise by £6m over the next 10 years.

Opportunities

Impact and expected savings from investing in prevention

Intervention	Recommendation	Estimated Impact	Net savings
Edge-of-care service	A service offering intensive support to families where children are at high risk of coming into care. Estimated reach: 135 families per year	Preventing 22 children from coming into care per year	£1,225,153
Pause	A service working with 15 women per year who have had babies removed at birth	Preventing 2 – 5 further children from being taken into care at birth.	£128,520 - £307,945
Domestic violence victims programme	Expand existing STEPS programme from current capacity of ~75 per year to ~135 per year	Preventing 144 additional incidents of domestic violence	£133,220
Domestic violence perpetrators programme	Expand current programme from 10 to 20 places per year	Preventing 19 additional incidents of domestic violence per year	-£7,293

How the children's social care system works in Thurrock



Key questions addressed in the report

Questions not addressed in this report

The report focusses on ways of reducing the number of children in the social care system. Other ways of reducing the costs of social care are not covered. These may include, for example, reducing the number of agency staff and more efficient procurement of foster care places.

There is evidence that a growing number of families and children are coming into contact with the social care system in Thurrock and nationally. The reasons for this have not been well understood but the pressures that this puts on the social care system are clear: social workers are increasingly over-burdened and the cost to the council is growing. In order to help alleviate those pressures, this report attempts to answer some key questions:

What are the pressures on the social care system?

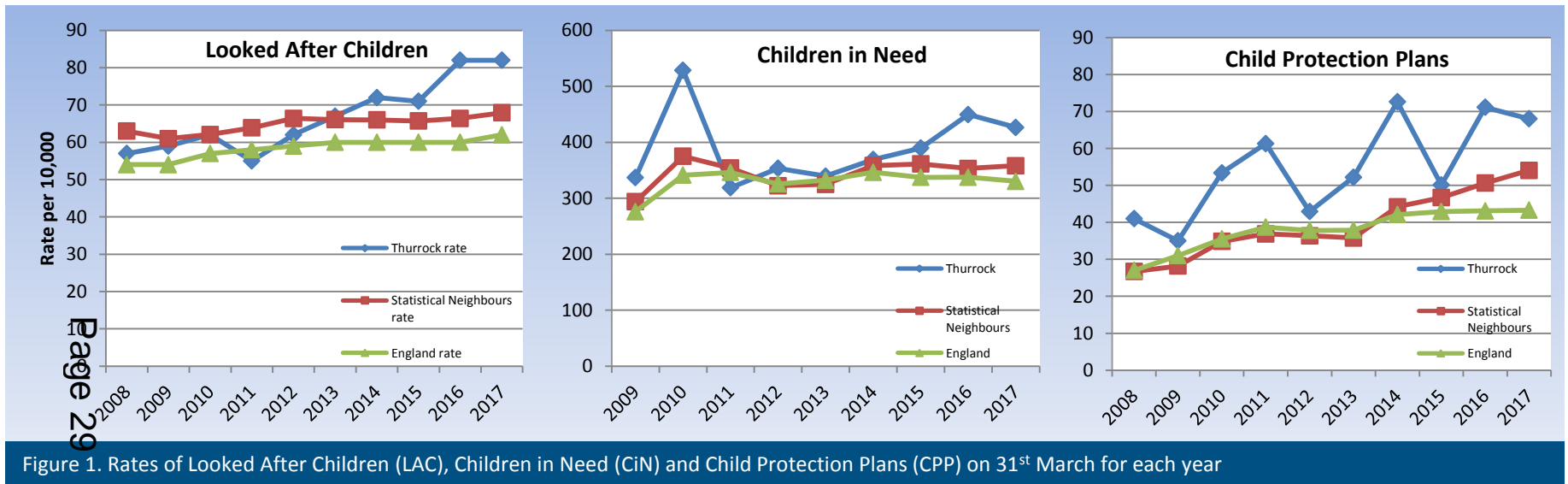
- Is the number of children in the social care system rising and is it higher than in other areas?
- Why are the numbers rising in Thurrock?
- How many children are likely to be in the social care system in future?

How can we reduce the number of children in the social care system?

- What works in early help?
- What works for Children in Need (CiN) and Child Protection Plans (CPP)?
- What works for Looked After Children (LAC)?

What are the financial opportunities related to reducing the number of children in the system?

What are the pressures? Is the number of children in the system rising?

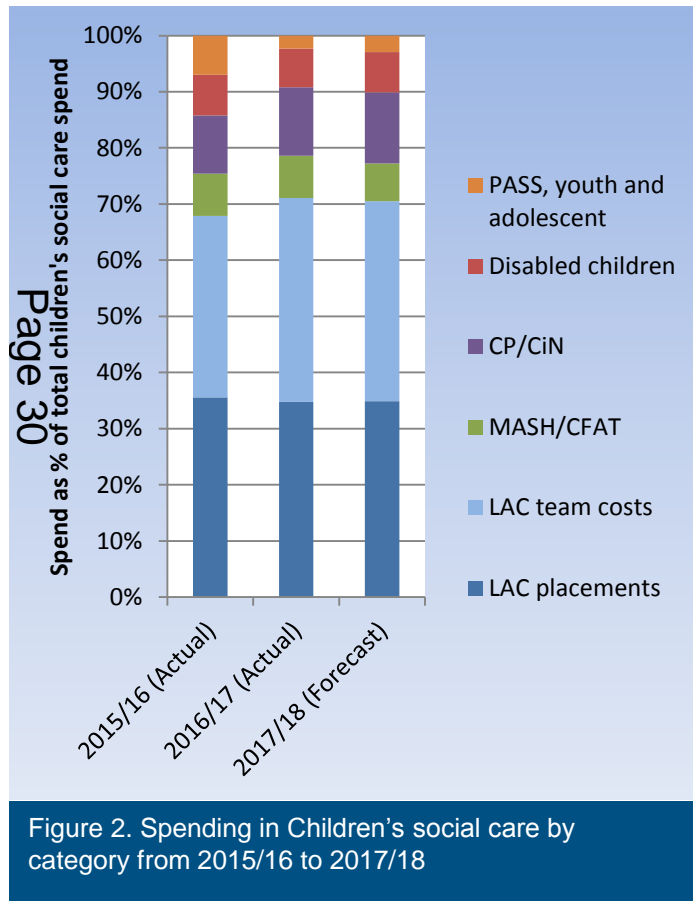


Page 29

- There has been a significant increase in the number and rates of children in all parts of the social care system in recent years. Rates in Thurrock have risen faster than in other comparable areas in recent years though the most recent data suggests they are levelling off or even beginning to decline.
- The number of Looked After Children (LAC) has been growing nationally, though rates (per 10,000 children) have remained stable.
- In Thurrock the number of LAC has increased from 210 in March 2012 to 345 by March 2017

Rates in Thurrock have risen faster than in other comparable areas in recent years. The most recent data suggests they are levelling off or even beginning to decline though it is too early to tell if this is a long-term change in trajectory.

What are the pressures? Budget and spending



The National Picture

Spending on children's social care has been rising nationally and many Local Authorities are struggling to continue to fund the current system. Analysis for the Department of Education (2016) found that the main strategy pursued by local authorities was to try to reduce the number of children in the system through greater emphasis on early help and service integration.

However, actual spending on early help services has declined in most areas, even as spending on statutory services (CiN, CPP, and LAC) has risen. The main reason for this is that cutting spending on early help is generally much easier than reducing spending on statutory services.

The Local Situation

In Thurrock, as nationally, investment in early help services appears to have declined as a proportion of spend in recent years. For example, spending on Early Offer of Help services in Thurrock has declined from £0.93 million in 2015/16 to £0.39 million in 2017/18. At the same time spending on external purchasing of placements for Looked After Children rose from £8.9 million to £9.3 million. Much of the reduction in early help services followed the withdrawal of £450,000 of NHS funding previously contributed by Thurrock Clinical Commissioning Group.

We estimate that spending on Looked After Children now makes up around 71% of all children's social care spending.

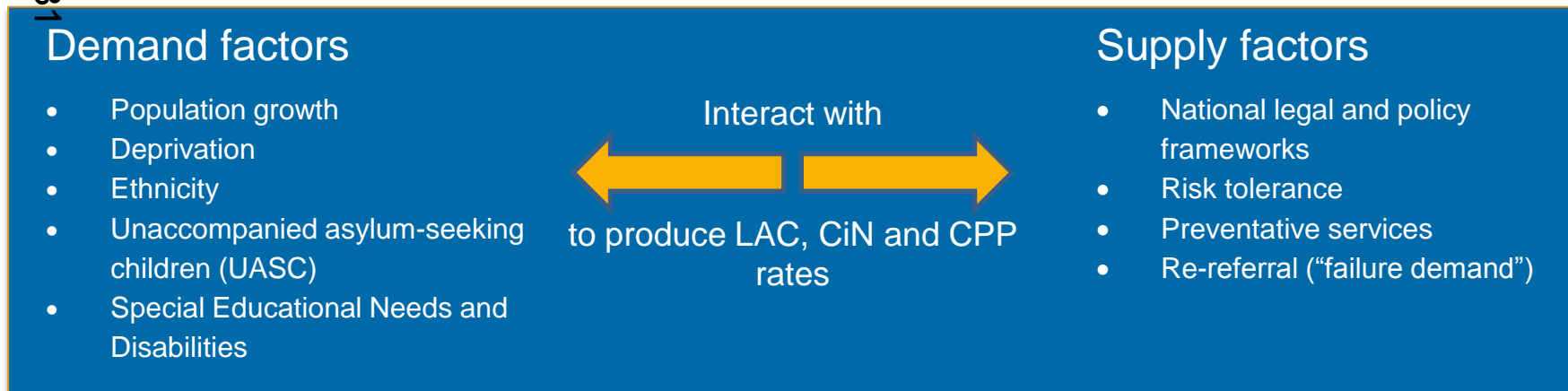
Why have numbers been rising faster in Thurrock than elsewhere?



In trying to understand the rise that has occurred in recent years, it is helpful to consider two types of force which may result in children ending up in the social care system. It might be that more children need a social care intervention than in the past (demand factors), or it could be that the social care system is more likely to intervene than in the past (supply factors). Therefore, we can address this question by considering the demand and supply factors (Bywaters P, et al., 2017) which may be at work in Thurrock.

Based on a review of the research literature we have identified the factors shown below as a framework for understanding growing demand for social care in Thurrock. We have tried, where possible, to quantify the impact of each of these factors in Thurrock in recent years.

Page 31



Why have numbers been rising faster in Thurrock than elsewhere? Demand factors

Demand factor	Possible impact in Thurrock
Population growth	Rapid economic and housing development make this a particularly strong pressure in Thurrock. Our child population grew by 13.3% from 2006 to 2016, compared to 6% for England as a whole.
Unaccompanied Asylum Seeking Children (UASC)	Thurrock has seen a large number of UASC become Looked After Children in recent years. At one point there were 103 UASC in the care system. A national agreement on the dispersal of UASC has helped to reduce the number to 38 (Aug 2017) and it is likely to fall further.
Deprivation	Evidence shows a strong association between deprivation and rates of social care intervention. There have been modest increases in child poverty in Thurrock in recent years.
Ethnicity	We found that the evidence linking ethnicity and social care activity is inconclusive.
Special Educational Needs and Disabilities	As child mortality rates decline, the number of children with complex needs is growing. A small number of these children become looked after but the costs of their care can be very high.

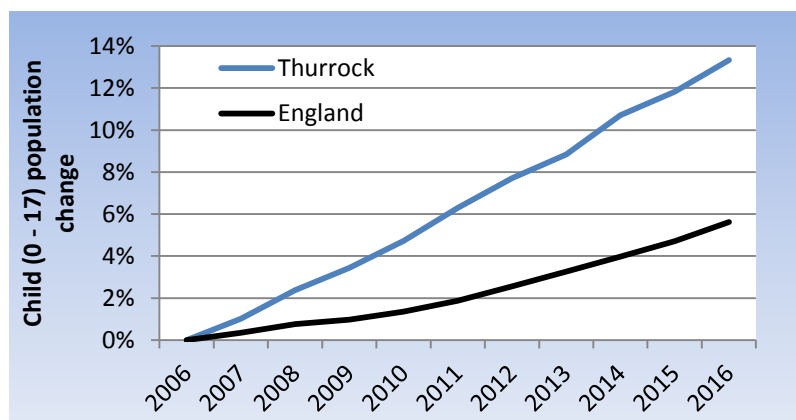


Figure 3. Percentage change in the child population

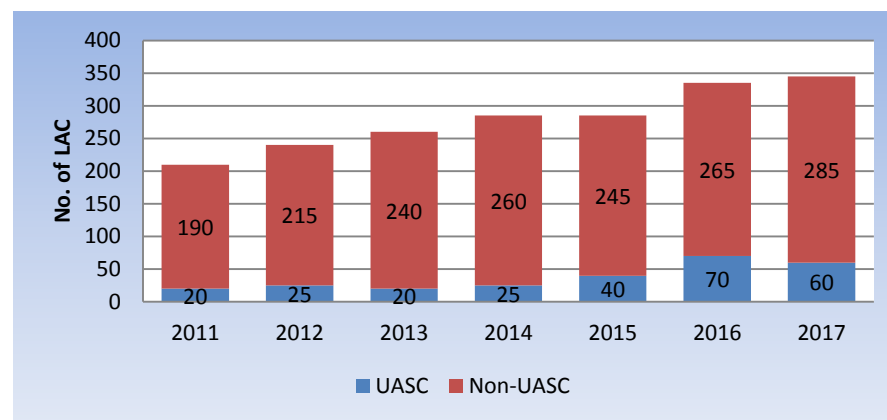


Figure 4. Number of LAC in Thurrock by UASC category

Why have numbers been rising faster in Thurrock than elsewhere? Demand factors

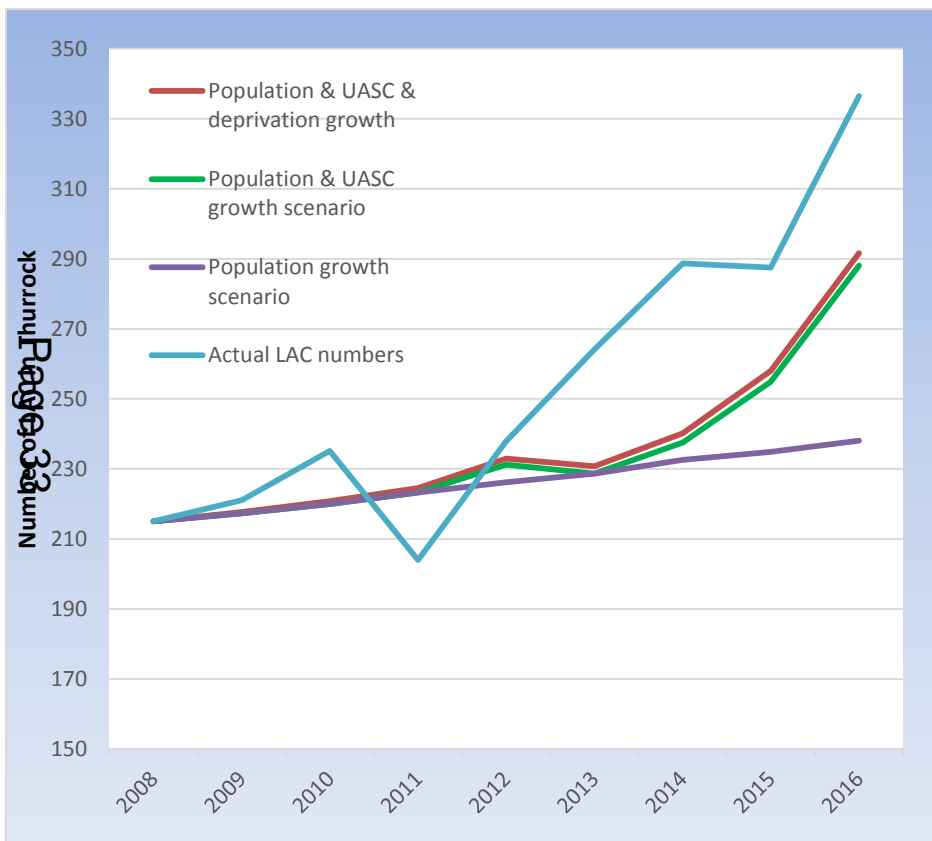


Figure 5. Actual number of LAC in Thurrock vs modelled scenarios for different demand factors, 2008 – 2016

Quantifying the impact of demand factors

To understand the impact of factors on the numbers of LAC in Thurrock, we modelled different scenarios.

In Figure 5, the blue line shows the actual numbers of Looked After Children on 31 March each year (2008 – 2016).

The purple line (population growth scenario) shows what the numbers would have been if the rate of LAC had stayed constant at 2008 levels. Population growth alone would have led to a modest rise in LAC numbers.

The green line (population & UASC growth), adds in the actual numbers of UASC who entered the system in those years.

The red line (population & UASC & deprivation) adds in an estimate of the impact of slightly higher levels of child poverty.

Other demand factors were not easily quantified in this way but are unlikely to make a significant difference.

Conclusion: Demand factors can account for some but not all of the rise in LAC numbers, it is likely that supply factors have also contributed.

Why have numbers been rising faster in Thurrock than elsewhere? Supply factors

Supply factor	Possible impact in Thurrock
National legal and policy frameworks & Risk tolerance	High profile, national cases of child protection failure have shaped the policy environment over a number of years. New policy and guidance may have contributed to a decline in risk tolerance amongst social workers. This is likely to have had a long-term affect on the number of children entering and staying in the social care system though the impact is hard to quantify.
Preventative services	The amount of money spent on preventative services has fallen significantly in recent years (see above). This has led to the decommissioning of services such as the Family Intervention Programme and community substance misuse services. Other services have had their capacity reduced. Within statutory services, social workers now have less time to focus on working with families who have had children removed from their care.

Page 34

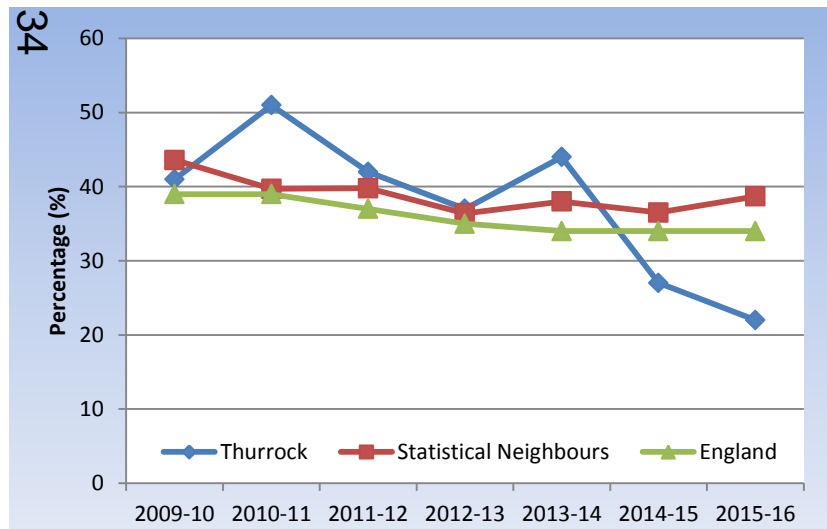


Figure 6. Percentage of children returning home after a period of being looked after

Even once children become looked it is sometimes possible for them to return to their own families once significant issues have been resolved. The proportion of children returning home decline from a peak of 51% in 2010/11 to just 22% in 2015/16. The reasons for this decline need to be investigated further but it is possible that the squeeze on resources has left social workers and support services little time to continue working with the families of children who have been taken into care. This trend has major consequences for the children and families involved as well as an impact on the number of children who remain looked after by the local authority.

How many children are likely to be in the social care system in future?

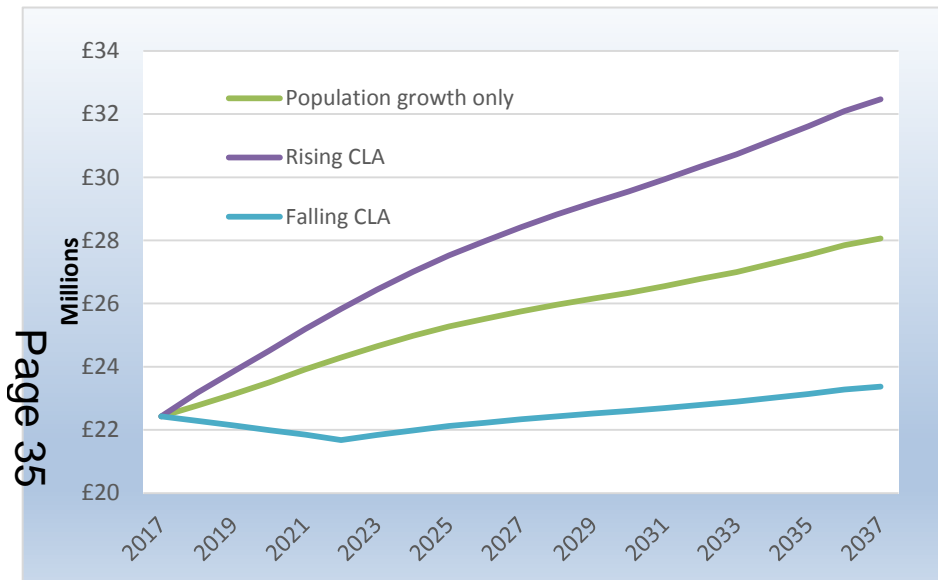


Figure 7. Forecast impact of changes in LAC rates and population growth on the cost of services for Looked After Children in Thurrock 2017 - 2037

How to forecast future numbers

Forecasting future numbers is challenging and involves a lot of uncertainty. We have developed a new forecasting methodology for Thurrock. The alternative scenarios presented here represent our best estimate of future costs if a given set of assumptions holds true.

The cost of doing nothing

Projected changes in LAC costs over the next 10 years

Scenario	3 years	5 years	10 years
Rising CLA	£2.08M	£4.01M	£5.98M
Population growth only	£1.07M	£2.22M	£3.32M
Falling CLA	-£0.44M	-£0.59M	£0.94M

Forecast scenarios

Rising CLA scenario: This is based on trends over the past 5 – 10 years and forecasts a 27% increase in activity over 10 years.

Population growth only: This scenario shows that even if LAC rates remain stable in future, population growth will drive up costs significantly.

Falling CLA: This shows the impact of bringing LAC rates down to the current national average over the next 5 years and then staying steady after that.

Action is underway to move Thurrock from the upper to the lower trajectory.

How can we reduce the number of children in the system?

Recent Trends and Action

A new Prevention and Support Service: this brings together a number of previous prevention services including the Early Offer of Help and Troubled Families. This has also been integrated into Brighter Futures.

Brighter Futures has been established to integrate Thurrock's early years and preventative services. Providing a more joined-up service is designed to prevent issues from escalating to the level where social worker intervention is required

Targeting social work. A data system called Xantura has been commissioned to provide 'predictive analytics'. The system uses data from a variety of sources to flag up children at high risk, allowing social workers to intervene earlier and more effectively.

Reductions in agency staffing have been pursued. Agency numbers now appear to be in steady decline.

Signs of Safety. This is a strengths-based approach to child protection work which is being rolled out in Thurrock to improve case work and risk assessment.

Service review. The council's Service Review Board is working closely with Children's services to find ways of working more efficiently.

LAC numbers may have started to decline according to the most recent data, since April 2017, the number of LAC in the system has started to decline. Much of this is due to reductions in the number of Unaccompanied Asylum Seeking Children.

Recommended * future developments on early help	Expected Impact
<p>Expand the capacity of parenting services by 90% to meet current demand.</p> <p>Review the referral system into early help and especially investigate the lack of referrals into Triple-P parenting programmes.</p>	<p>Expanding capacity of existing services will prevent escalation to CiN/CP/LAC stage or enable de-escalation for families already at those stages.</p>
<p>Consider expanding inclusion criteria of some early help services to families of CiN/CP children and families who have had children removed. Capacity may need to be expanded accordingly.</p>	<p>Prevent escalation to LAC and promote children returning home to their families.</p>
<p>Ensure end of Troubled Families (TF) funding is used to strengthen prevention</p> <p>Planned changes to TF funding should be treated as an opportunity to focus the service on preventing children from becoming looked after in line with the evidence base presented in the full report.</p>	<p>Ensure that the balance of investment is moving towards prevention rather than away from it, reducing costs in more expensive parts of the system.</p>

* All recommendations are based on an extensive review of research evidence for reducing numbers in the social care system

How can we reduce the number of children in the system?

Estimated financial impact of a new edge of care service

Plans are being drawn up to design an edge-of-care service. Based on a cost-effectiveness study of Multi-Systemic Therapy we estimated the possible costs and benefits for Thurrock

Eligible families	135.5
Cost per family	£2,285
Total cost	£309,618
No. of LAC prevented	21.7
Gross savings	£1,534,771
Net savings	£1,225,153
Directly cashable net savings*	£649,331

* "Directly cashable" savings can quickly be removed from budgets. Here, only placement costs are considered to be directly cashable. Other savings (e.g. staff time) may take longer to translate into reduced spending.

Recommended future developments on CiN and CPP	Expected Impact
<p>Establish an "edge of care" service to work intensively with children who are at risk of becoming looked after.</p> <p>Design this service based on Functional Family Therapy (FFT) or Multi-Systemic Therapy (MST) which have the strongest evidence base.</p> <p>Put in place a robust evaluation plan to establish effectiveness and cost-effectiveness</p>	Prevent children in the social care system (CIN and CPP) from becoming looked after.
<p>Expand existing domestic violence programmes</p> <p>Expand the two existing programmes (for victims and perpetrators). An increase of 50% - 100% would be needed to meet current demand.</p>	Reduce: risk to parents and children who are victims of domestic violence; the impact of domestic violence on children; escalation within the social care system.
<p>Targeted drug and alcohol outreach to families of Children in Need or on a Child Protection Plan</p>	Prevent escalation and reduce the duration of social care intervention by dealing with underlying substance misuse

How can we reduce the number of children in the system?

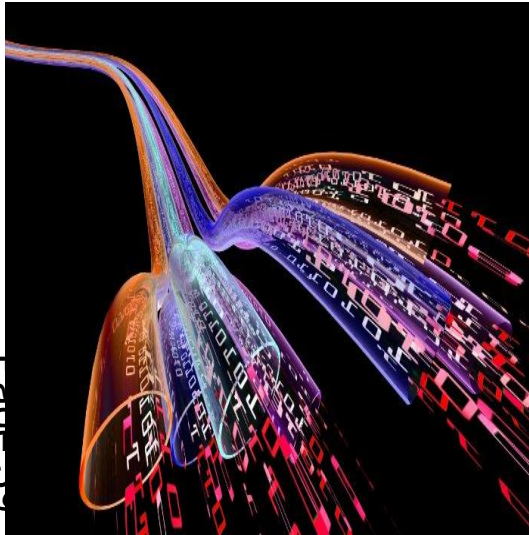
Page 38



For women aged 16 – 17, when their first child is removed, there is a 32% chance of this being repeated... and 40% of mothers who have multiple children removed at birth have themselves experienced being in care

Recommended future developments on Looked After Children	Expected Impact
<p>Invest in services which allow Looked After Children to return home</p> <p>Work systematically with families of children who have been taken into care to resolve problems and, where possible, to allow them to return home.</p> <p>Consider including this within the remit of the edge-of-care service.</p> <p>Design of this service should begin with an in-depth analysis of why rates of children returning home to their families appear to have declined significantly in recent years.</p>	<p>Increase the number of Looked After Children able to return home to their families and reduce the amount of time they spend in care and reduce costs significantly.</p>
<p>Prevent mothers from having multiple babies taken into care</p> <p>Commission the Pause programme (or something similar) to provide intensive support to mothers who have had a baby removed.</p> <p>Put in place robust evaluation of the programme to assess effectiveness and cost-effectiveness.</p>	<p>Reduce the number of mothers who have multiple babies removed from their care and reduce the number of children taken into care.</p>

How can we reduce the number of children in the system? Improving information



Monitoring trends in key cost drivers will help to control costs and evaluate the effectiveness of preventative strategies

Recommendation	Details
Monitor trends in key cost drivers	Key cost drivers identified are: <ol style="list-style-type: none"> 1. The numbers of weeks of care provided by the Council over the course of a year; 2. The average length of stay of children in care; 3. The average cost of placements of different kinds.
Link data on activity and spend	Linking data systems recording activity and spend will allow more accurate understanding of why costs are changing.
Carry out a financial deep dive on Looked After Children	A more accurate understanding is needed of all the costs associated with Looked After Children.
Investigate the decline in the number of children returning to their families after a period of being looked after	This may be an important factor increasing the number of children in care and, therefore, costs. Further data analysis and case-note audit may be required to understand the rapid decline in recent years.
Develop and update the forecasting model	The forecasting here is based on a new modelling method which could be significantly improved in detail and accuracy.

Acknowledgements

- **Report authors:**
- Tim Elwell-Sutton, Assistant Director and Consultant in Public Health
- Elozona Umeh, Senior Public Health Programme Manager – Children
- Maria Payne, Senior Public Health Programme Manager – Health Intelligence
- Annelies Willerton, Public Health Graduate Trainee

A large number of people contributed to this project and it would be impossible to thank them all. We would especially like to thank and acknowledge the important contributions made by the following people who have assisted in the production of this report:

Page 40

- Alex McLellan, Business Intelligence Analyst for Children’s Services
- Emma Sanford, Strategic Lead – Health and Social Care Public Health
- Kareema Olaleye, Public Health Graduate Trainee
- Kelly Clarke, Public Health Intelligence Information Support Officer
- Mark Livermore, Commissioning Officer – Children’s Services
- Manbir Virk, Report Writer/Developer
- Mun Arthur, Business Intelligence & Data Analytics Manager
- Nicola Smith, Public Health Intelligence Analyst
- Nilufa Begum, Management Accountant

Thanks also to the Aubrey Keep Library service which supported the literature review work in this report and to all the managers within Children’s Services who contributed their time and knowledge to this project.

A Sustainable Children's Social Care System for the Future

Annual Report of the Director of Public Health 2017



List of Abbreviations

Abbreviation	Full form
CFAT	Child and Family Assessment Team
CiN	Child in Need
CPP	Child Protection Plan
LAC	Looked After Child
MASH	Multi-Agency Safeguarding Hub
NICE	National Institute for health and Care Excellence
PASS	Prevention and Support Service
SEND	Special Educational Needs and Disabilities

Contents

Foreword.....	3
Acknowledgements.....	4
Introduction	5
Summary of recommendations and financial opportunities.....	8
1. The pressures on children’s services	11
1.1. Is the number of children in the social care system in Thurrock rising and is it higher than in other areas?	11
1.1.1. Numbers of Looked After Children	11
1.1.2. Caring for Looked After Children	13
1.1.3. Children in Need and Child Protection Plans	14
1.1.4. Budget and Spending	16
1.2. Why are the numbers of children in the social care system rising in Thurrock?.....	19
1.2.1. Demand factors.....	19
1.2.2. Supply factors.....	26
1.3. How many children are likely to be in the social care system in future?	28
1.3.1. The Thurrock Public Health Team Forecasting Model.....	28
1.3.2. The impact of population growth	30
1.3.3. The impact of changes in LAC rates	33
2. How can we reduce the number of children in the social care system?.....	35
2.1. iMPOWER recommendations	35
2.2. Recent Developments.....	35
2.3. What works in early help?	36
2.2.1. Home Visiting	36
2.2.2. Parenting Programmes	37
2.2.3. Troubled Families.....	37
2.2.4. Recommendations on Early Help.....	38
2.4. What works for Child in Need and Child Protection Plans?.....	39
2.3.1. Domestic violence/abuse.....	39
2.3.2. Substance misuse.....	41
2.3.3. Edge-of care services and multiple-issue interventions	42
2.5. What works for Looked After Children?	45
2.4.1. Reunification	45
2.4.2. Repeated care proceedings	47
3. Key findings and conclusions	49
3.1. Key findings.....	49
3.2. Detailed Recommendations.....	50
Bibliography	55
Appendix 1. Technical details of the Thurrock Public Health Team Forecasting model.....	59
Appendix 2. Literature review on what works in prevention and early intervention	62

Foreword

Public Health as a professional discipline encompasses a unique skill set that includes epidemiological expertise such as the quantification of need, demand and supply, the assessment of evidence, and the predictive modelling of health and care systems. In the UK these skills have historically been applied to healthcare systems in order to assist the NHS to commission and deliver more efficient, effective and equitable health services. However the move of public health to local authorities has presented opportunities for these skills to be applied more widely.

My Annual Public Health Report last year used this public health skill set in answering the question, ‘what would make our adult health and care services more sustainable in financial and operational terms?’ By mapping how our residents, and the funding that accompanies their journeys, flow through different constituent organisations, we were able to understand how clinical and professional practice in each organisation impacted on the system as a whole. This led to a series of recommendations to reduce demand for the most expensive and high intensity interventions by improving clinical practice ‘upstream’ in primary and community care to prevent avoidable events such as strokes, heart attacks and falls. The findings and recommendations within the report were seized upon by our local clinicians and system leaders, and have resulted in a comprehensive programme of system transformation and improvement that will ultimately lead to a new Accountable Care Partnership for Thurrock, reduced demand on local hospital and adult social care services, and demonstrable improvements in the health of our population.

This year I asked my team to apply the same skill set to children’s social care services, with a view to answering a similar question: how can we make our children’s social care system financially and operationally sustainable, and more effective? There were two reasons for my choice of topic. Firstly, it has long been known that children and young people who enter the care system typically experience poorer health and wellbeing outcomes than those in the general population. Experiencing care as a child or young person is associated with poorer educational attainment, poorer mental health, an increased risk of teenage parenthood and an increased likelihood of entering the criminal justice system. Indeed children and young people who become ‘looked after’ by the state experience some of the worst health inequalities of any group in society. Secondly, demand on children’s social care services is increasing at an unsustainable rate both nationally and locally. Modelling famously done in the London Borough of Barnet suggested that if action is not taken to address this, local authorities will need to spend their entire budget on social care by 2025.

This report aims to understand our local children’s social care system, the factors that are driving demand and most importantly, the actions that we can take to address that demand and improve health and wellbeing outcomes for the children and young people we care for. The work has been led by Tim Elwell-Sutton, Consultant in Public Health and his team and I commend it as one of the highest quality and most detailed pieces of public health practice in this field. I trust that the findings and recommendations contained within the report will be useful to colleagues in children’s social care in understanding our care system, and will continue the conversation on how we improve that system and the life chances of children and young people who enter it in the future.

Ian Wake

Director of Public Health, November 2017

Acknowledgements

Report authors:

Tim Elwell-Sutton, Assistant Director and Consultant in Public Health

Elozona Umeh, Senior Public Health Programme Manager – Children

Maria Payne, Senior Public Health Programme Manager – Health Intelligence

Annelies Willerton, Public Health Graduate Trainee

A large number of people contributed to this project and it would be impossible to thank them all. We would especially like to thank and acknowledge the important contributions made by the following people who have assisted in the production of this report:

Alex McLellan, Business Intelligence Analyst for Children’s Services

Emma Sanford, Strategic Lead – Health and Social Care Public Health

Kareema Olaleye, Public Health Graduate Trainee

Kelly Clarke, Public Health Intelligence Information Support Officer

Mark Livermore, Commissioning Officer – Children’s Services

Manbir Virk, Report Writer/Developer

Mun Arthur, Business Intelligence & Data Analytics Manager

Nicola Smith, Public Health Intelligence Analyst

Nilufa Begum, Management Accountant

Thanks also to the Aubrey Keep Library service which supported the literature review work in this report and to all the managers within Children’s Services who contributed their time and knowledge to this project.

Introduction

Why focus on children's social care?

One of the main goals of our Health and Wellbeing Strategy is to make Thurrock a place offering "Opportunity for All". Central to this goal is making Thurrock a place where children can flourish and achieve their full potential in life.

It is increasingly recognised that improving health and wellbeing for our population has to start early in life, even before birth. We now have a better understanding than ever of how distressing experiences in childhood are linked to poor health and wellbeing in adulthood. For example, it has been found (Bellis, et al., 2014) that adults who had several adverse childhood experiences, such as child abuse, parental separation, and household members with substance abuse are:

- nine times more likely to be incarcerated ;
- likely to have significantly worse mental health;
- three times more likely to develop diabetes ;
- six times more likely to have a stroke.

It is also increasingly understood that poor experiences in childhood can create intergenerational cycles of deprivation and poor health. People who have multiple adverse childhood experiences are also more likely to make poor educational progress, have unplanned pregnancies and be unemployed. This in turn can have a negative impact on their parenting ability, perpetuating the cycle across generations.

The role of the children's social care system is to ensure that all children have the opportunities they deserve and that, when things go wrong, children are kept safe. The local authority has a legal duty to intervene where there are concerns for the welfare of children in Thurrock. These can include cases of abuse or neglect. They also include situations where parents have problems with issues such as mental health or substance misuse which affect their ability to care for their children. In such cases, the social care system is there to safeguard the interests of the child. In the most extreme cases, courts may decide that a child should, for their own wellbeing, be taken into the care of the local authority and become a 'looked after child' (LAC).

Children's social workers have not traditionally been considered part of the public health workforce, yet their work has at least as much impact on the current and future health and wellbeing of children in Thurrock as that of health professionals.

Pressures on social workers and the whole social care system are growing each year. There is evidence that a growing number of families and children are coming into contact with the social care system. The reasons for this have not been well understood but the pressures that this puts on the social care system are clear: social workers are increasingly over-burdened and the cost to the Council is growing.

Last year's Annual Public Health Report considered ways in which the health and adult social care system could be made more sustainable. This year, we consider the children's social care system, the pressures on it, and how we can create a system which gives every child in Thurrock the best possible start in life.

How this report is organised

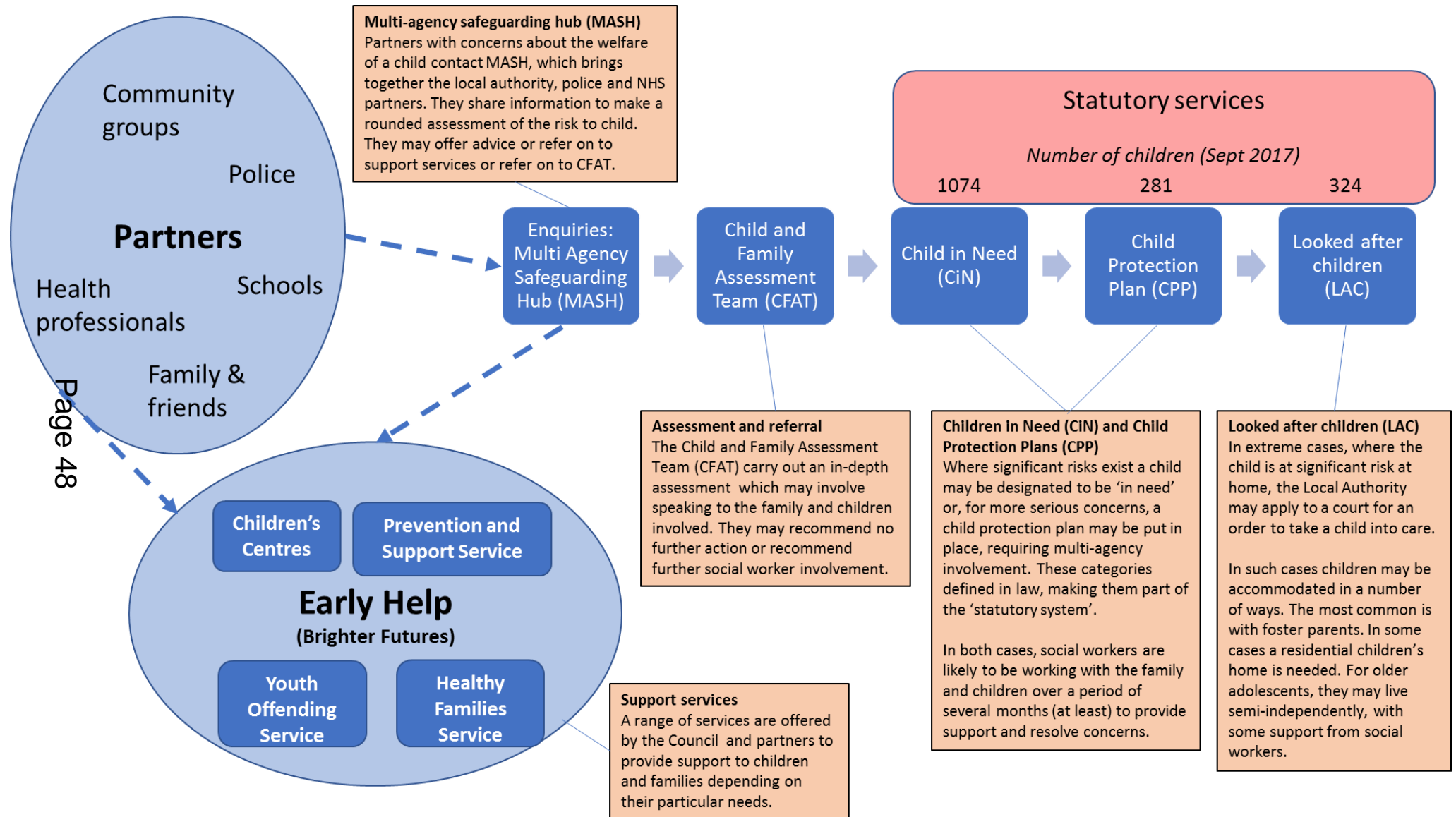
This report sets out to answer a number of key questions about the children's social care system and is organised the following way:

- A guide to how the children's social care system works;
- A summary of our recommendations and the financial opportunities identified by our work;
- Section 1 explores the pressures on children's social services. It aims to answer key questions including:
 - Is the number of children in the social care system rising faster in Thurrock than in other areas?
 - Why are the numbers rising so fast?
 - How many children are likely to be in the social care system in future?
- Section 2 looks at how we can reduce the number of children in the social care system. In particular, it considers what can be done to prevent children from being taken into care and finds that there are actions which can be taken at every stage of the system to prevent this outcome;
- Section 3 sums up the key findings and gives detailed recommendations.

Questions not addressed in this report

In this report we focus on ways of reducing the number of children in the social care system. Other ways of reducing the costs of social care are not covered. These may include, for example, reducing the number of agency staff or more efficient procurement of foster care places.

Figure 1. How the children's social care system works in Thurrock



Page 48

Summary of recommendations and financial opportunities

Summary of recommendations

Based on our analysis, we make the following three strategic recommendations for managing the pressures on the children's social care system in Thurrock:

1. Make a long-term strategic commitment to invest in prevention

To reduce the number of children in the social care system, a high-level strategic commitment must be made to re-balance investment towards preventative activities. In recent years investment in preventative services has been eroded whilst spending on high-cost care placements has increased. By rebalancing investment towards preventative services, we can prevent children from ending up in care unnecessarily and, over time, relieve financial pressures on the social care system. This rebalancing has already begun but must be continued over the long-term to ensure sustainability.

The change must be seen against the background of continuing cost pressures particularly due to rapid population growth. However, we have demonstrated that the cost of doing nothing is likely to be much higher than the costs of investing in preventative services.

2. Invest in the most effective preventative services

Making a strategic commitment to invest in prevention will only be effective if that investment is made in the right areas. Based on our review of evidence we recommend:

- **Early help:** Making efforts to expand the number of families benefiting from early help services by increasing capacity of existing services, strengthening referral systems and expanding inclusion criteria;
- **Children in Need & Child Protection Plans:** Investing in an 'edge of care' service to work intensively with children at greatest risk of coming into care; expanding the capacity of existing parenting and domestic violence programmes; more targeted drug and alcohol outreach to families of Children in Need or on a Child Protection Plan;
- **Looked After Children:** Working systematically with families who have had children removed to increase the chances of Looked After Children being reunited with their families; providing intensive support to mothers (especially young mothers) who have had babies removed from their care to prevent this from re-occurring in future.

3. Improve information on activity and spending

Reducing the number of children in the system and controlling costs can only be achieved if reliable activity and financial information are available, allowing us to understand current patterns of activity and spending. For the purposes of this report, a new way of forecasting future activity and spending has been developed. This kind of forecasting can help to make good strategic decisions and financial plans for the future. The model used here is relatively simple and its accuracy could be improved with more work in future. Moreover, a number of weaknesses in existing data systems have been identified during the course of this report, which hinder effective planning and cost control.

Further details on these recommendations are given in Section 3.

Financial Opportunities Identified

Implementing the recommendations above, especially investing in prevention, could have a measurable impact on costs on the cost of providing children’s social care services. We have identified three key drivers of cost in the system: the rate of Looked After Children; the length of stay in care; the cost of care placements. The table below shows the potential financial impact of changes in these key determinants of the costs of Looked After Children alongside the interventions which could influence these cost drivers.

Savings calculations include reductions in the amount of money spent on placements for Looked After Children. These are “directly cashable” – that is, the Council would immediately spend less money as a result. Other savings (e.g. reductions in staff time) are less easily cashable but can be translated into lower spending over time.

Table 1. Potential annual savings from changes in key cost drivers and interventions

Cost driver	Change	Savings per annum	Directly cashable savings*	Recommended Interventions
LAC rate	11.6% reduction (to the same level as statistical neighbours)	£2.58M	£1.38M	Implement a new edge of care service possibly including short stay residential care for adolescents; support for mothers who have had babies removed from their care.
	5% reduction	£1.13M	£0.60M	Increase referrals and capacity in: parenting services and domestic violence programmes. Targeted drug and alcohol outreach to families of Children in Need or on Child Protection Plans. Successor to current Troubled Families programme designed to reduce LAC numbers.
Length of stay in care	1-week reduction to 34 weeks	£0.65M	£0.34M	Targeted re-unification work carried out by a new edge of care service.
	3-week reduction to 32 weeks	£1.93M	£1.02M	Extending the remit of early help and CP/CIN services to work with families who have had children removed from their care.
Cost of care placements	5% reduction	£0.6M	£0.6M	Enhancing procurement of placements. Continued efforts to recruit more in-house foster carers.

* See box at the top of this page for an explanation of ‘directly cashable savings’

Where possible we have estimated the impact and financial savings that would result for implementing specific interventions.

Table 2. Impact and expected savings from investing in prevention interventions

Intervention	Recommendation	Estimated Impact	Net savings	More details found in:
Edge-of-care service	Based on Functional Family Therapy or Multi-Systemic Therapy, working with 135 families per year	Preventing 22 children from coming into care per year	£1,225,153	Section 2.3.3
Pause	A service working with 10 women per year	Preventing 2 – 3 children from being taken into care at birth.	£128,520 - £307,945	Section 2.4.2
Domestic violence victims programme	Expand existing STEPS programme from current capacity of ~75 per year to ~135 per year	Preventing 144 additional incidents of domestic violence	£133,220	Section 2.3.1
Domestic violence perpetrators programme	Expand current programme from 10 to 20 places per year	Preventing 19 additional incidents of domestic violence per year	-£7,293	Section 2.3.1

1. The pressures on children’s services

1.1. Is the number of children in the social care system in Thurrock rising and is it higher than in other areas?

We can understand the pressures on the children’s social care system in two main ways: the number of children in the system, and the amount of money being spent on it. In this section, we consider first the trends in numbers of children in the system in Thurrock and secondly the cost of the social care system overall. In order to understand whether the numbers in Thurrock are growing faster than in other areas, we make comparisons with both national figures for England, regional figures for the East of England, and with ‘statistical neighbours’; that is, a group of local authorities which are statistically similar to Thurrock in terms of their population, levels of deprivation and other relevant factors.

1.1.1. Numbers of Looked After Children

There has been a steady rise in the number of Looked After Children (LAC) in Thurrock in recent years from 210 in March 2012 to 345 by March 2017 (Table 3). Numbers have also been rising in other areas. In one sense, then, Thurrock is not unique.

In order to understand whether the rise seen in Thurrock is greater than in other areas, however, we need to look at the rates of LAC per 10,000 children (aged 0 to 17). These rates are shown in Figure 2. This shows that for England and Thurrock’s statistical neighbours, rates have been fairly steady in recent years. In Thurrock, however, the rate began to rise after 2011 and has increased by almost 50% since then (from 55 to 82 per 10,000 population). More recently, the rate of LAC in Thurrock has levelled off. However, this is primarily due to reductions in the number of Unaccompanied Asylum Seeking Children (UASC) in the system (Figure 3). The underlying rates of non-UASC have continued to rise. This is discussed below (section 1.2.1).

The fact that the numbers of Looked After Children have continued to rise nationally and amongst Thurrock’s statistical neighbours, whilst the rates have stayed the same suggests that, in other areas, the rising number of LAC over the past 5 years has been driven primarily by population growth, whilst in Thurrock other, local factors have been at work, driving up the rates as well as the numbers of Looked After Children.

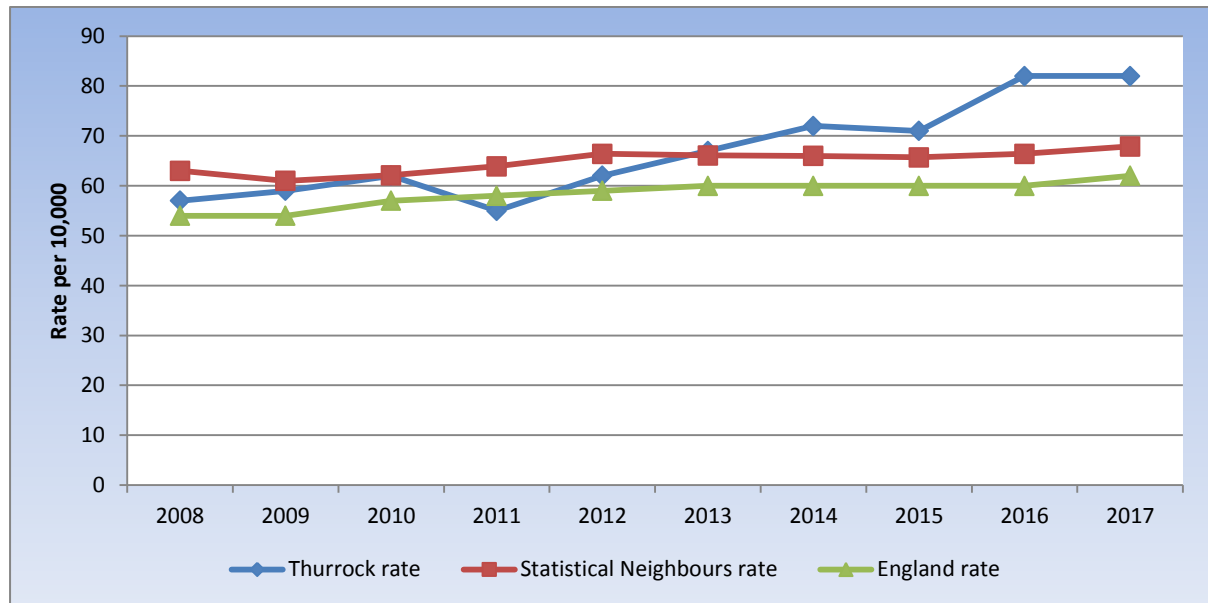
Table 3. Numbers of Looked After Children for Thurrock and comparator areas (2011 – 2017 – as of 31st March each year)

	2011	2012	2013	2014	2015	2016	2017
Thurrock	210	240	260	285	285	335	345
Statistical Neighbours	362	377	374	376	380	384	392.5
East of England	6410	6420	6300	6350	6140	6330	6460
England	65510	67070	68060	68810	69480	70440	72670

More recently, however, there does appear to be a levelling off in the rates in Thurrock which may suggest that the long-term upward trend is now coming under control. The latest data available at the time of writing is shown in Figure 4 below. This shows that since the start of this financial year (April 2017) rates have declined slightly from their 2016/17 levels. Much of this has been due to lower numbers of Unaccompanied Asylum Seeking Children (UASC) though the non-UASC rates also

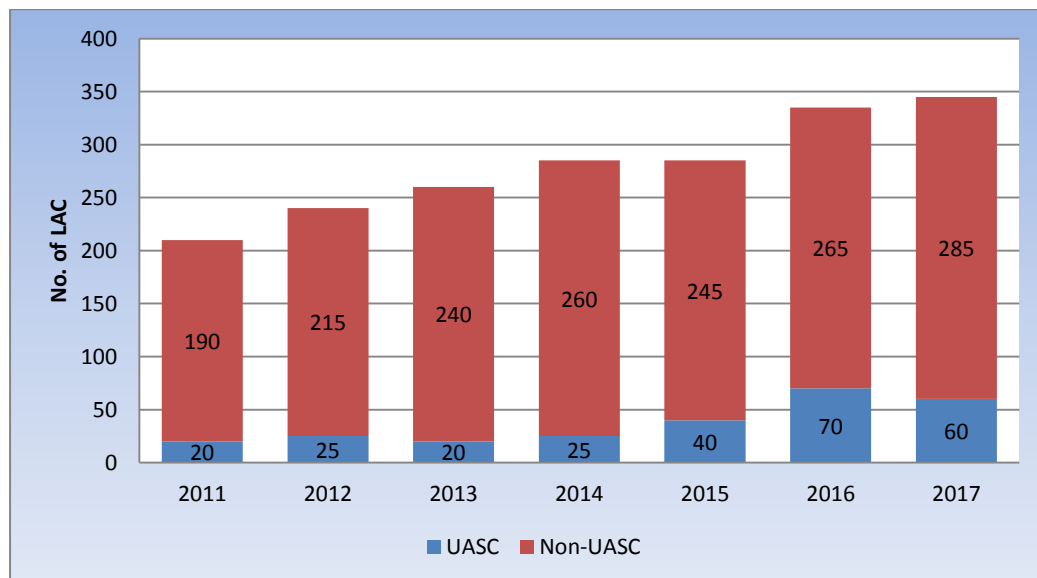
appear to be stable or declining. It is too early to tell at this stage whether these recent changes represent the beginning of a long-term change the trajectory of LAC rates but there are some encouraging signs.

Figure 2. Rates of Looked After Children in Thurrock, England and Statistical Neighbours at year end for 2008/9 to 2016/17



Source: LAIT

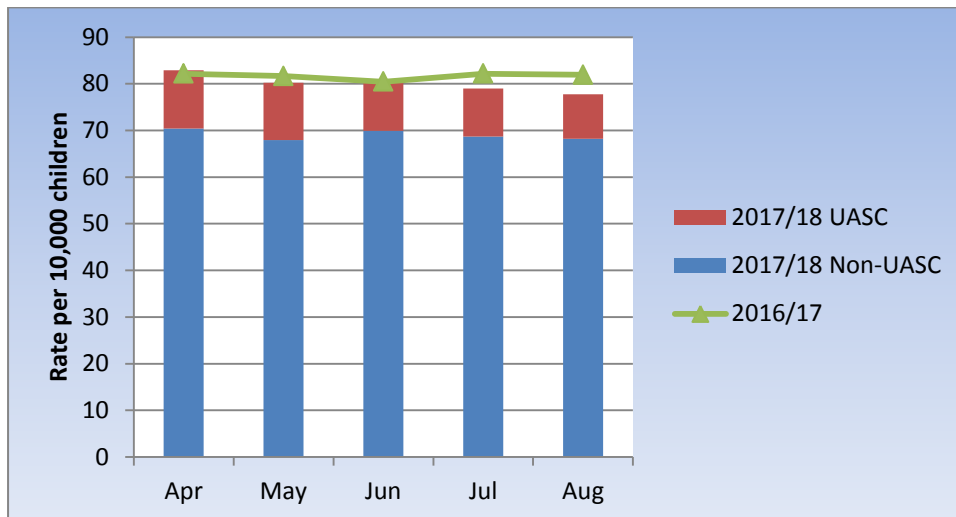
Figure 3. Number of Looked After Children in Thurrock by UASC* and non-UASC category, 2011 – 2017



Source: Department for Education Children Looked After Returns, 2011/12-2016/17

* UASC: Unaccompanied Asylum Seeking Children

Figure 4. Rate of Looked After Children in Thurrock by month for 2017/18.

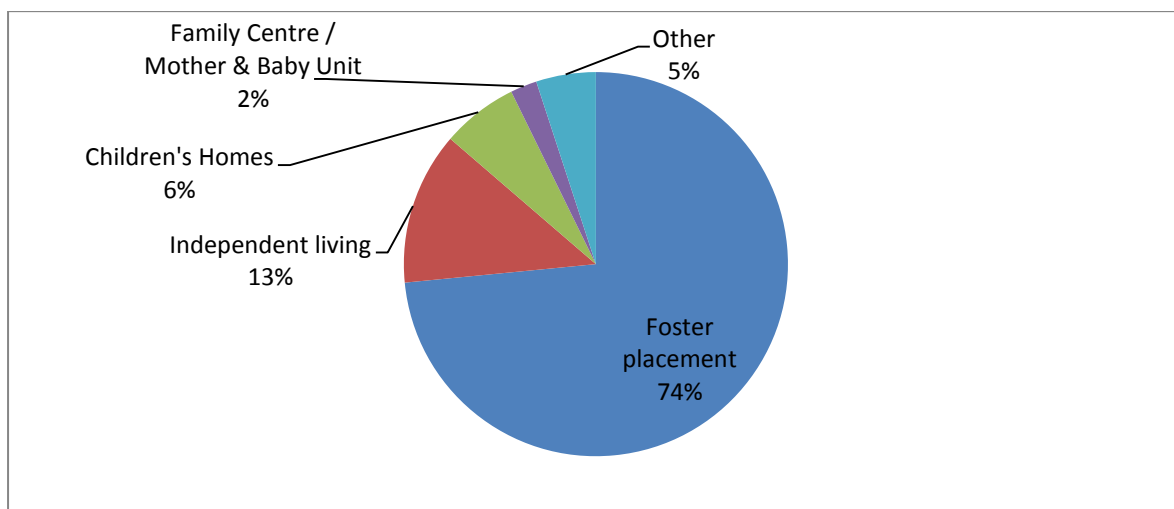


Source: Thurrock Council data

1.1.2. Caring for Looked After Children

Looked after children can be cared for in a number of ways. Figure 5 (below) shows that at the time of writing 74% of Looked After Children in Thurrock were in foster placements. In cases where a foster placement is either unsuitable or unavailable, children may be cared for in residential children's homes. Some older teenagers in care may be able to live semi-independently in settings where they are supported to learn important skills such as budgeting and cooking for themselves. In cases where a baby is at risk at home, it is possible for them to be accommodated in mother and baby unit which allows the bond between mother and baby to be continued in a safe environment.

Figure 5. Looked after children placements in Thurrock (August 2017)

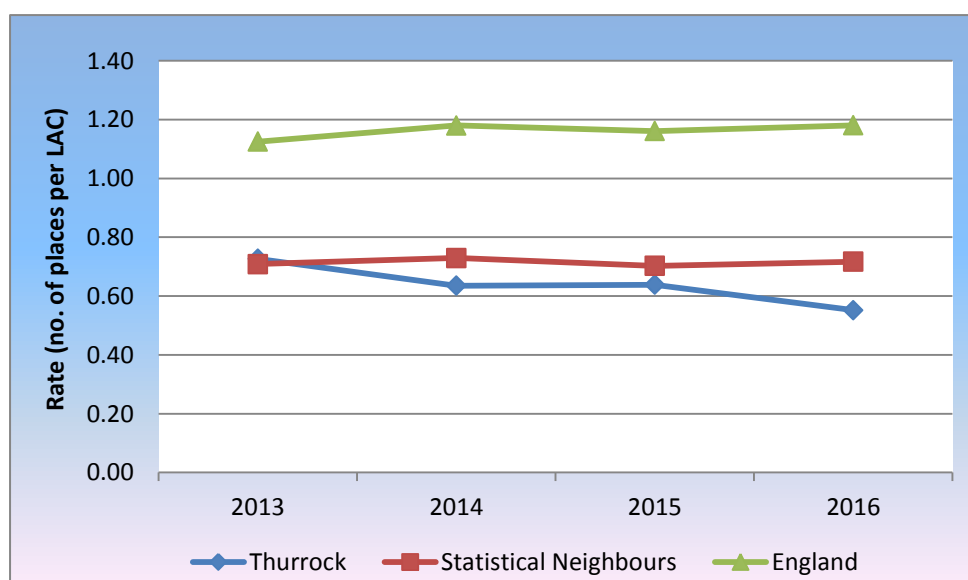


Recruiting and retaining sufficient foster carers is a major challenge for many local authorities including Thurrock. Some foster carers are employed directly by the local authority and others work through agencies known as IFAs (Independent Fostering Associations). It is significantly more expensive for the local authority to employ foster carers through agencies but a shortage of in-house foster carers sometimes makes this necessary.

Even taking into account agency provision, there is a shortage of foster carers available in Thurrock. Figure 6 indicates that this shortage has been getting worse for several years now, declining from 71 places available per 100 LAC in 2013 to just 55 in 2016. Thurrock now has the lowest rate of foster places available among all its statistical neighbours and a rate which is about half the national average. This can be attributed to an increase in the number of Looked After Children, alongside no significant change in the number of foster places available.

This shortage has implications for both the quality and the cost of care. The shortage of supply means that social workers have little choice when trying to match Looked After Children with suitable foster carers and often have to make compromises such as placing children far out of the borough. As Thurrock social workers have a duty to visit and support LAC even when they are living out of the borough, these arrangements take up a lot of social worker time and incur high travel costs.

Figure 6. Rate of approved foster places for Thurrock, England and statistical neighbours at year end, 2013 - 2016



Source: Fostering in England Statistics

1.1.3. Children in Need and Child Protection Plans

Although it is possible for children to become looked after soon after their first contact with the local authority, most children who end up being looked after have previously been classified as Children in Need (CiN) or, where concerns were more serious, have been on a Child Protection Plan (CPP). The length of these plans can vary from a few months to several years. In some cases they are ended when concerns are addressed and it is possible to 'step down' the care of that child (i.e. end social care involvement in their lives). In other cases, these plans end when the children reach the age of 18 or are taken into care.

During the course of a CiN or CP plan social workers are regularly involved with the child and their family with the aims of ensuring the child's safety and supporting families to make any changes needed to care for their child.

Similar to the trends for LAC, from a low point in 2011, the rate of Children in Need (CiN) appears to have risen in Thurrock in recent years and is now well above the national average and the average

for statistical neighbours (Figure 7). National rates, and those for statistical neighbours, meanwhile, appear to have stayed fairly stable over the same period.

The pattern for Child Protection Plans is similar, in that rates in Thurrock have increased over the past 6 – 8 years (Figure 8) and are higher than for comparators. One difference here, however, is that there does appear to have been a steady rise in CP plan rates nationally and amongst statistical neighbours over the same period. Overall, the data suggest that there are local factors at work keeping the amount of activity in Thurrock’s social care system high and rising.

Figure 7. Rate of Children in Need per 10,000 population (0 – 17) for Thurrock, England and statistical neighbours (2009 - 2016)

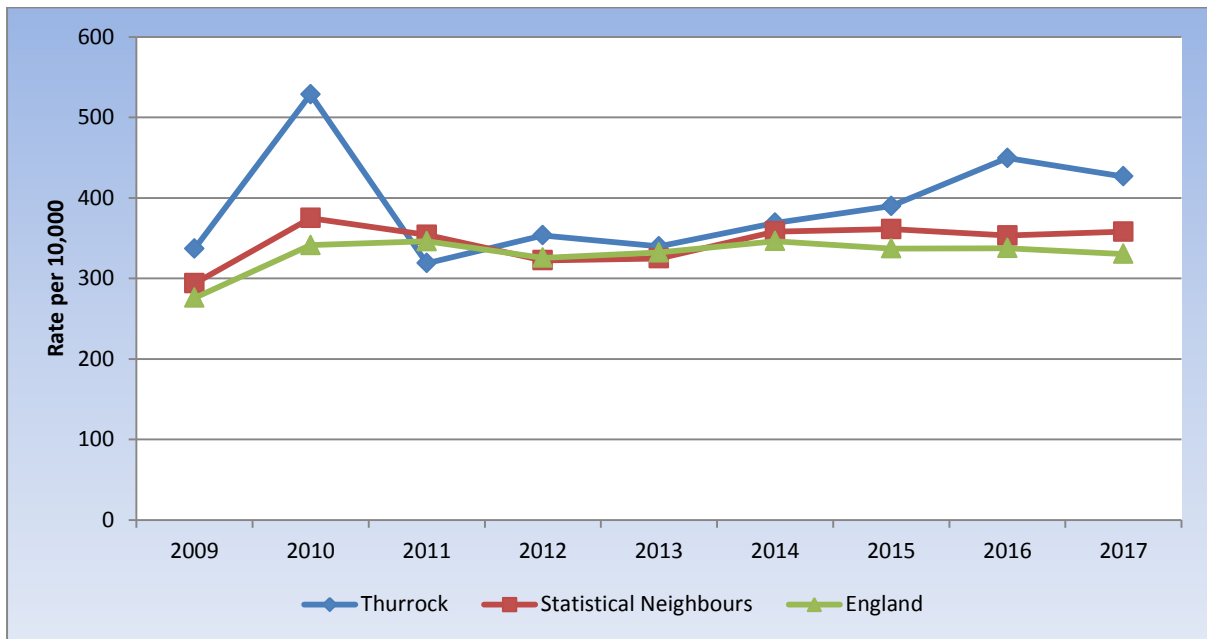
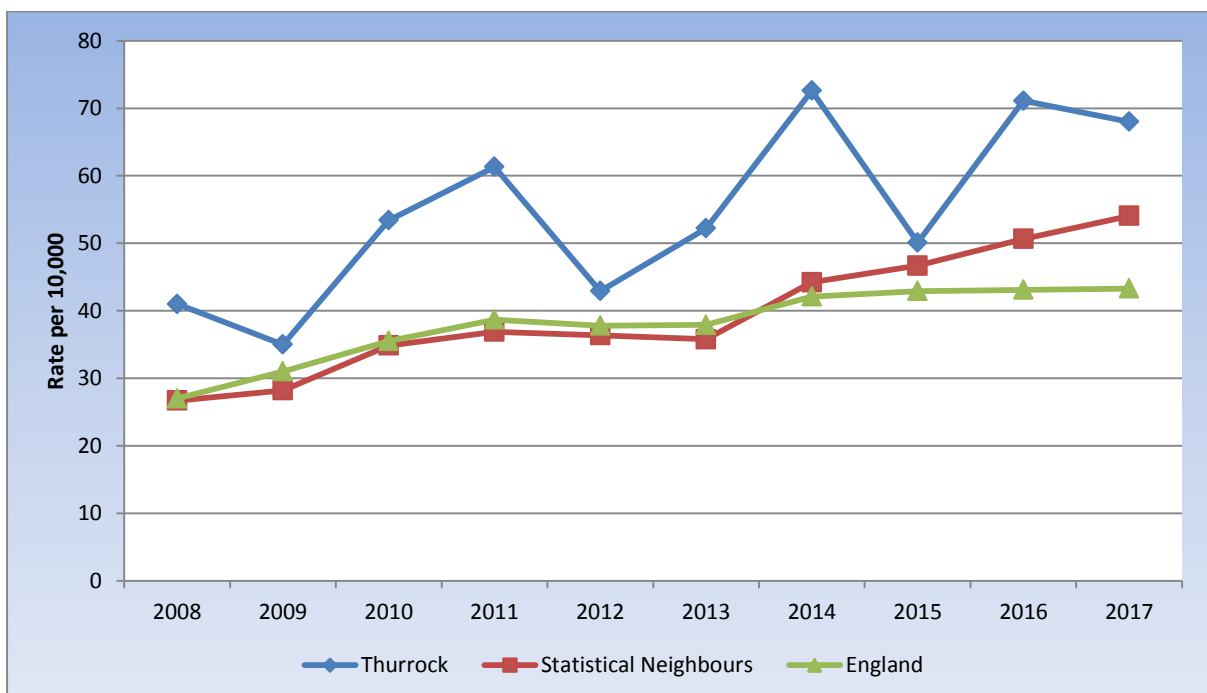


Figure 8. Rate of children subject to a Child Protection Plan per 10,000 for Thurrock, England and statistical neighbours (2008 - 2016)



Multi-Agency Safeguarding Hub

MASH (the Multi-Agency Safeguarding Hub) is the 'front door' for most children's social care work.

The MASH was established in 2014 with the aim of providing better inter-agency working and information sharing. As the first point of contact for most safeguarding enquiries, the MASH controls, to some extent, the flow of demand into the children's social care system. There is some evidence that the complexity of cases being referred into the MASH is increasing, with the proportion of enquiries rated as *Red* (the highest risk category) at the start doubling from 16.7% to 34.4% between 2015/16 and 2016/17. This has an impact on the workload of the statutory services, as the proportion of MASH enquiries that were transferred into social care increased from 64.9% to 76.2% in the same period.

1.1.4. Budget and Spending

The National Picture

Spending on children's social care has been rising nationally and many Local Authorities are struggling to continue to fund the current system. Analysis for the Department of Education (2016) looking at how Local Authorities have responded to these pressures since 2010 found that the main strategy pursued by most local authorities was to place greater emphasis on early help and integrating services. Both of these strategies are designed to reduce the numbers of children in the system and to prevent cases from escalating to the most expensive part of the system where children are taken into local authority care.

Although most authorities believe that early help (prevention) is vital for managing rising costs, analysis of actual spending shows a different picture. Between 2010/11 and 2013/14 national spending on statutory services (CiN/CPP and LAC) rose in real terms (from £5.659 billion to £5.890 billion) and as a proportion of total spending on children's services (from 57% to 65%) whilst spending on other areas decreased. One conclusion of the report was that:

Spending on some service areas was difficult or impossible for participating councils to change, for example where there were contractual constraints or statutory responsibilities, as for Looked After Children... however local councils had greater flexibility to decide spending changes on other areas, such as children's services early help. (Department for Education, 2016, p. 14)

The Local Situation

Analysis of local spending is not simple (see Data warning!) but the following conclusions are reasonably certain:

Data warning!

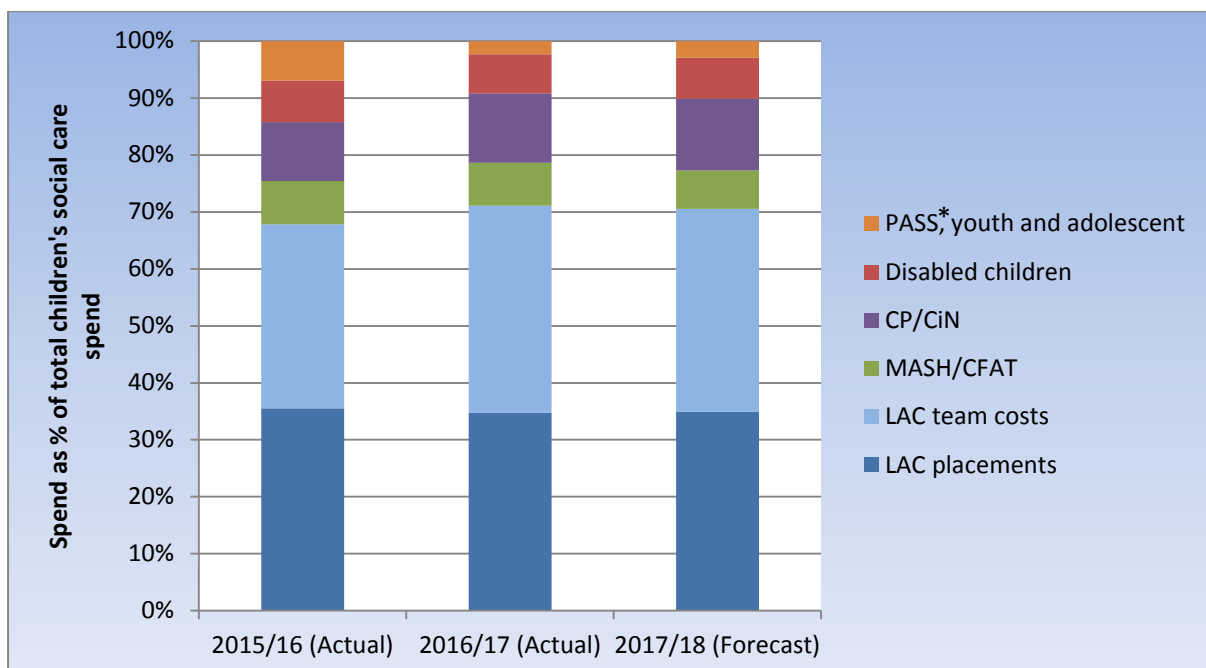
Analysing spending on children's social care is complex. It requires a number of assumptions to be made about what constitutes 'social care'. Moreover, categorisation of spending in this area has not always been consistent over the years, making it challenging to analyse trends over time. The analysis presented here, therefore, should be treated with some caution but represents our best estimate of how spending on children's social care has changed over recent years.

Also, for the purposes of this report spending on Looked After Children has been separated from other costs. This is based on a high-level analysis of budgets. A financial deep dive is needed to get a more accurate picture of the true costs to the Council of Looked After Children.

- In Thurrock, as nationally, investment in Early Help services has declined as a proportion of spend in recent years. For example, spending on Early Offer of Help services in Thurrock has fallen from £0.93 million in 2015/16 to £0.39 million in 2017/18. At the same time spending on external purchasing of placements for Looked After Children rose from £8.9 million to £9.3 million. Much of the reduction in early help services followed the withdrawal of £450,000 of NHS funding previously contributed by Thurrock Clinical Commissioning Group (CCG).
- By far the biggest area of spending on children’s social care is on Looked After Children (see Figure 9). Although the number of LAC at any one time is relatively small, the associated costs make up around 71% of all spending on children’s social care (see Figure 9). This is a rough estimate and further financial analysis is needed to obtain an accurate figure for the costs of LAC to the Council. Much of this cost is associated with ‘placements’ (e.g. the cost of foster care or children’s homes places).
- The most recent national data indicates that Thurrock’s rate of spend per looked after child has reduced over the last three years and is now similar to the average for England and for our statistical neighbours (Figure 10).

Overall, it is clear that controlling the costs of children’s social care in future will depend to a great extent on the ability of the Council to control costs associated with Looked After Children since this makes up the majority of spending. Reducing costs in this area, however, is likely to require greater investment in early help services and other strategies which reduce the number of children who end up being taken into local authority care.

Figure 9. Spending in Children’s social care by category from 2015/16 to 2017/18

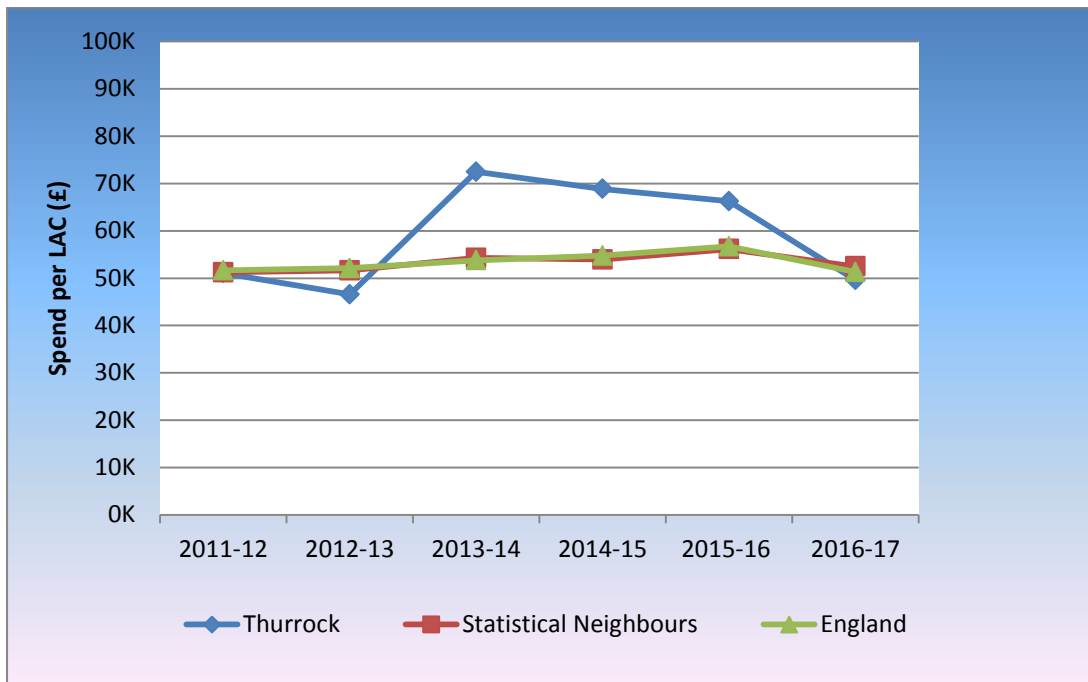


Source: Thurrock council finance

Note: “LAC team costs” are budgets for the social care teams working primarily with LAC. This will include some placement costs but further work is needed to separate these out from other team costs including staff and travel costs.

PASS: Prevention And Support Service

Figure 10. Spending on Looked After Children in Thurrock, and comparators, from 2011/12 to 2016/17



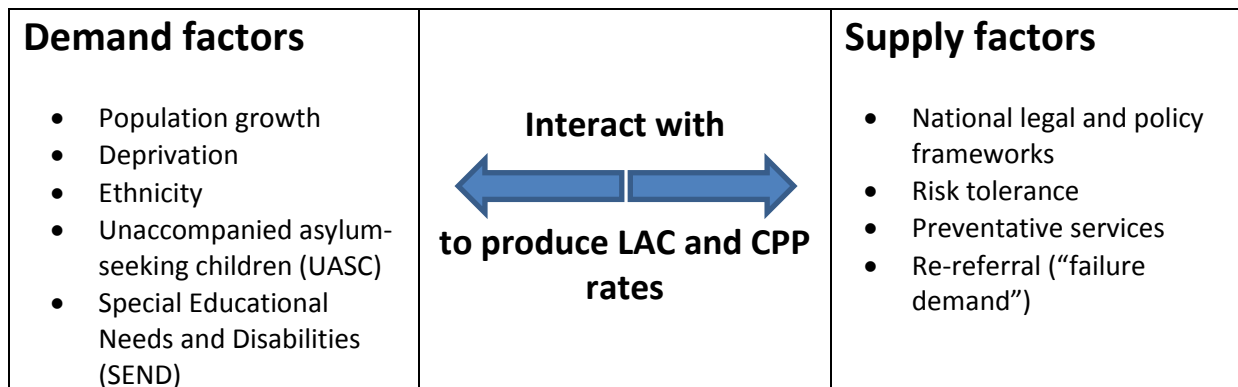
Source: Department for Education Local Authority and School Expenditure statistics and Children Looked After Returns, 2011/12-2016/17

1.2. Why are the numbers of children in the social care system rising in Thurrock?

We have seen that the numbers of children in the system are growing in Thurrock, faster than in other comparable areas. In trying to understand the rise that has occurred in recent years, it is helpful to consider two types of force which may result in children ending up in the social care system. It might be that more children need a social care intervention than in the past (demand factors), or it could be that the social care system is more likely to intervene than in the past (supply factors). Therefore, we can address this question by considering the demand and supply factors (Bywaters P. , et al., 2017) which may be at work in Thurrock.

Based on a review of the research literature we have identified the factors shown in Figure 11 as a framework for understanding growing demand for social care in Thurrock. The following sections try, where possible, to quantify the impact of each of these factors in Thurrock in recent years.

Figure 11. Demand and supply model adapted for Thurrock



Source: adapted from (Bywaters P. , et al., 2017)

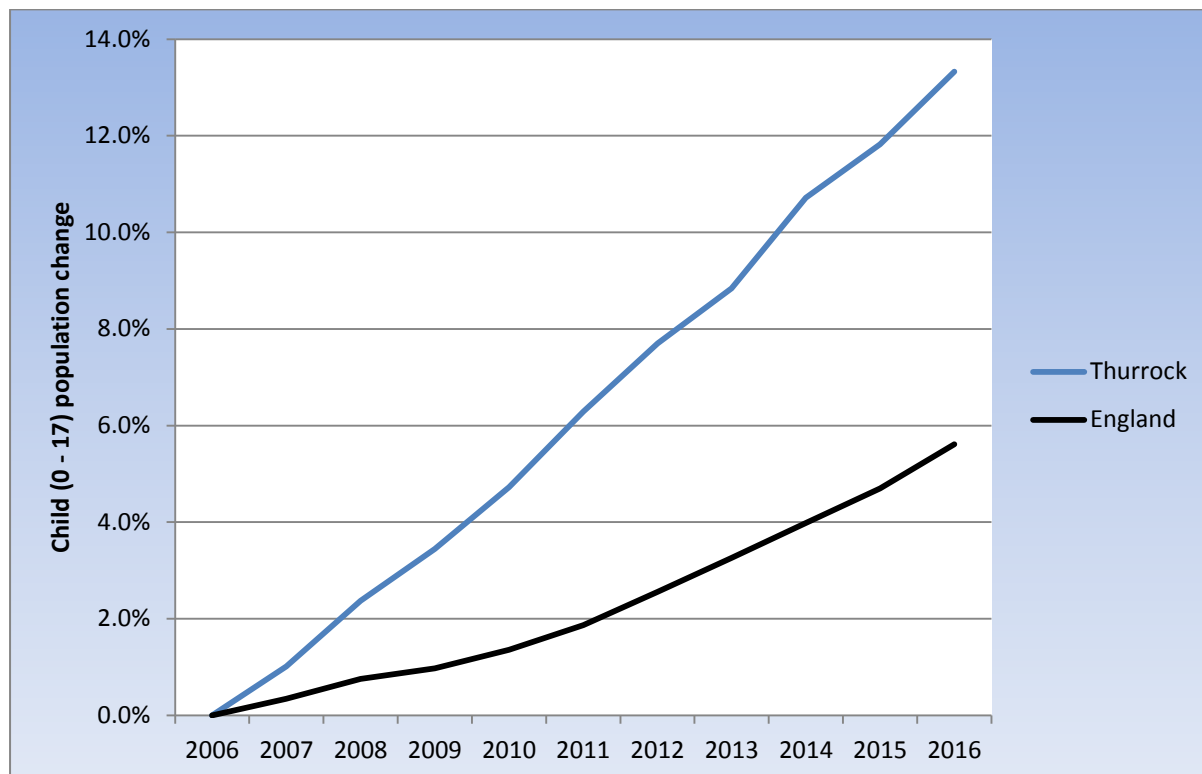
1.2.1. Demand factors

Population growth

Possibly the most important reason for the growing number of children in the social care system in Thurrock is growth in the child population. The high level of economic and housing development taking place makes this a particularly strong pressure in Thurrock. Moreover, this growth in population is likely to continue into the future, placing increasing pressure on the social care system and other services.

Figure 12 below shows the growth of the child (0 – 17) population in Thurrock and England between 2006 and 2016. This shows that the rate of growth in Thurrock has been much faster than the national average. Whereas England’s child population grew by 6% over that ten-year period, in Thurrock growth was more than double that at 13.3%. This, then, may account for a significant portion of the growth in the number of children in the social care system in recent years.

Figure 12. Percentage change in the child population in Thurrock and England, 2006 - 2016



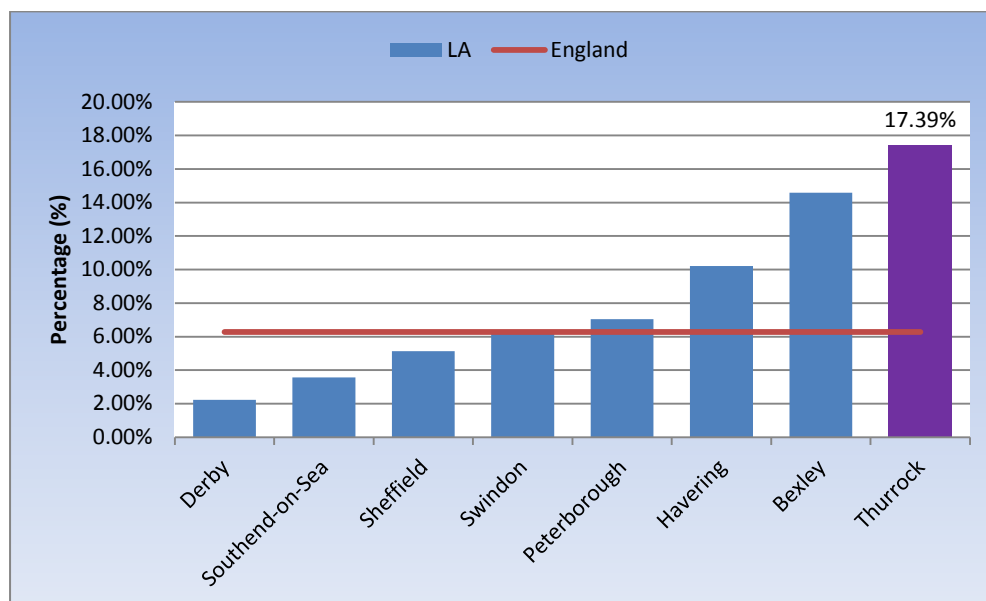
Source: Office for National Statistics mid-year population estimates

Unaccompanied Asylum Seeking Children

Another factor which has certainly contributed to the rise in the number of Looked After Children in recent years has been a higher number of unaccompanied asylum seeking children (UASC) arriving in Thurrock from abroad. Thurrock is particularly likely to receive such children due to the presence of two major shipping ports in the borough. If they are not accompanied by parents or guardians, asylum-seeking children become looked after by the local authority. Figure 13 shows that Thurrock has a much higher proportion of UASC in its LAC population than any of its statistical neighbours.

An arrangement to allow the dispersal of UASC across the region (the Interim National Transfer Protocol for Unaccompanied Asylum Seeking Children) came into force in July 2016. This has resulted in a significant reduction in the number of UASC in Thurrock. From a peak of 103 in 2016, the numbers have fallen to 38 in August 2017. This agreement also means that over the next 1 – 2 years, the numbers of UASC are likely to continue to fall to around 28.

Figure 13. Percentage of Looked After Children who are unaccompanied asylum seekers (UASC), 2017



Source: Department for Education Children Looked After Returns, 2016/17

The high number of Unaccompanied Asylum Seeking Children entering Thurrock in recent years has had a significant impact on Thurrock’s headline rate of LAC. The financial impact, however, has been mitigated to some extent by the provision of central government funding for this purpose.

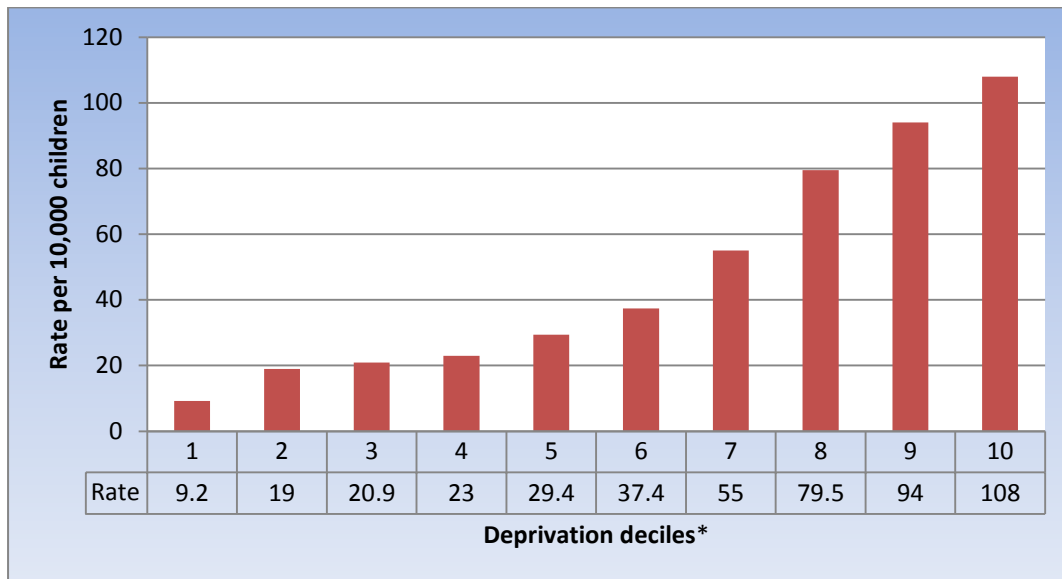
Nevertheless, there has been a significant impact on finances and on staff time, as the funding provided to the local authority for UASC does not cover the full cost of care.

Just as the financial pressure of rising UASC numbers was mitigated to some extent by central government funding, the potential benefits of falling numbers will, to some extent, be offset by a decline in this funding stream. Further work is needed to calculate the likely financial impact of this trend.

Deprivation

There is a large body of evidence showing that socio-economic deprivation is strongly associated with social care intervention rates. This is not only true in the UK, but internationally. A two-year project funded by the Nuffield Foundation found that children living in the most deprived areas of England were 13 times more likely to be on a Child Protection Plan and 11 times more likely to be looked after than children in the least deprived areas (Bywaters P. , Brady, Sparks, & Bos, 2016). This study also found that, on average, each 10% increase in neighbourhood deprivation levels was associated with a 30% increase in rates of Looked After Children (see Figure 14). The reasons for this strong association between deprivation and social care intervention are less clearly understood though there is evidence that both supply and demand factors play a part (Hood, Goldacre, Grant, & Jones, 2016).

Figure 14. Looked-after children rates per 10,000 children by deprivation decile*, midlands sample, 31 March 2012

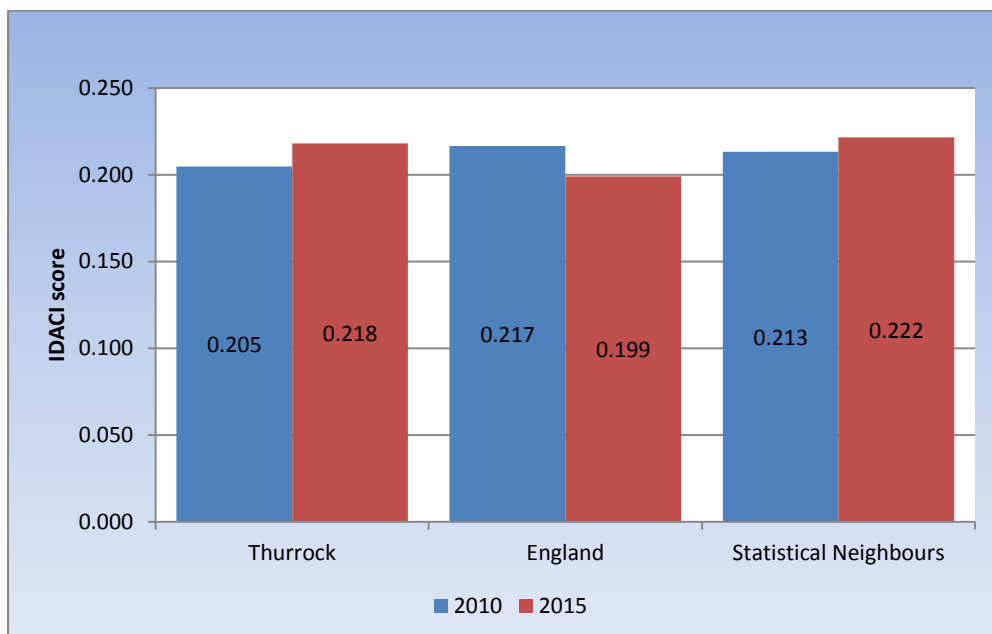


Source: (Bywaters P. , Brady, Sparks, & Bos, 2016)

* Deprivation deciles, 1 = most affluent, 10 = most deprived.

Given that deprivation is a strong driver of demand for social care, to what extent can this help to explain increases in social care activity in Thurrock in recent years? A useful measure of deprivation related to children is the IDACI (Income Deprivation Affecting Children Index) score which is a measure of the proportion of children (age under 16) living in low income households in an area. Figure 15 shows IDACI scores for Thurrock and comparator areas. The most recent data suggest that the level of child deprivation in Thurrock is slightly above the national average, though it is similar to statistical neighbours. Moreover, whereas nationally child deprivation rates appear to have declined between 2010 and 2015, in Thurrock and similar areas, child deprivation has become more common. We would, therefore, expect some increases in the level of social care activity in Thurrock due to increased levels of deprivation.

Figure 15. IDACI score for Thurrock, England and statistical neighbours (2010 and 2015)



Source: Department for Communities and Local Government

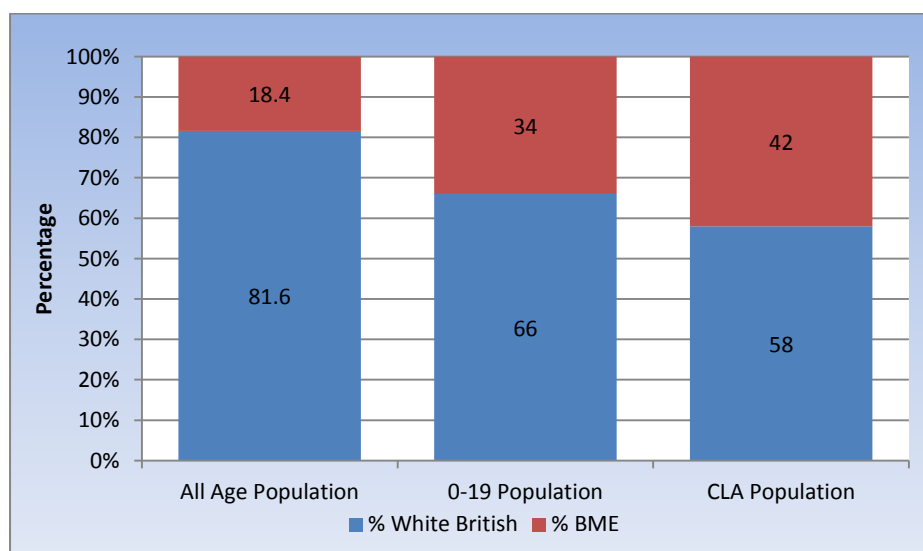
Ethnicity

A variety of evidence suggests that ethnicity is a major factor influencing demand for children’s social care services. For example, Harrow Council (2017) conducted a review of its Children’s services and concluded that the two key factors driving demand within the borough were population growth (particularly increase in wards with higher levels of deprivation) and increases in the diversity of ethnic groups within the borough. Similarly, it is clear in Thurrock that children from ethnic minorities are over-represented in the LAC population (see Figure 16).

However, we need to be cautious about assuming that greater ethnic diversity in the borough means that more children are likely to have contact with social care. Table 4, for example, illustrates that the relationship between ethnicity and social care activity is patterned by deprivation in a complex way. Further research is needed in this field to disentangle the effects of deprivation and ethnicity with any certainty.

If we were to assume that children from ethnic minorities are more likely to be known to social care, it might offer some explanation for rising social care activity in Thurrock. Data from the school census shows that the proportion of children from ethnic minority backgrounds in Thurrock is rising steadily at a faster rate than in England or Thurrock’s statistical neighbours. Similarly, future demand may be affected by how the ethnic make-up of the population changes in future though it is hard to be sure what effect (if any) this might have.

Figure 16. Ethnicity of Thurrock’s all-age, 0 – 19 and LAC populations



Sources: Census 2011, School Census 2017 and Thurrock Council

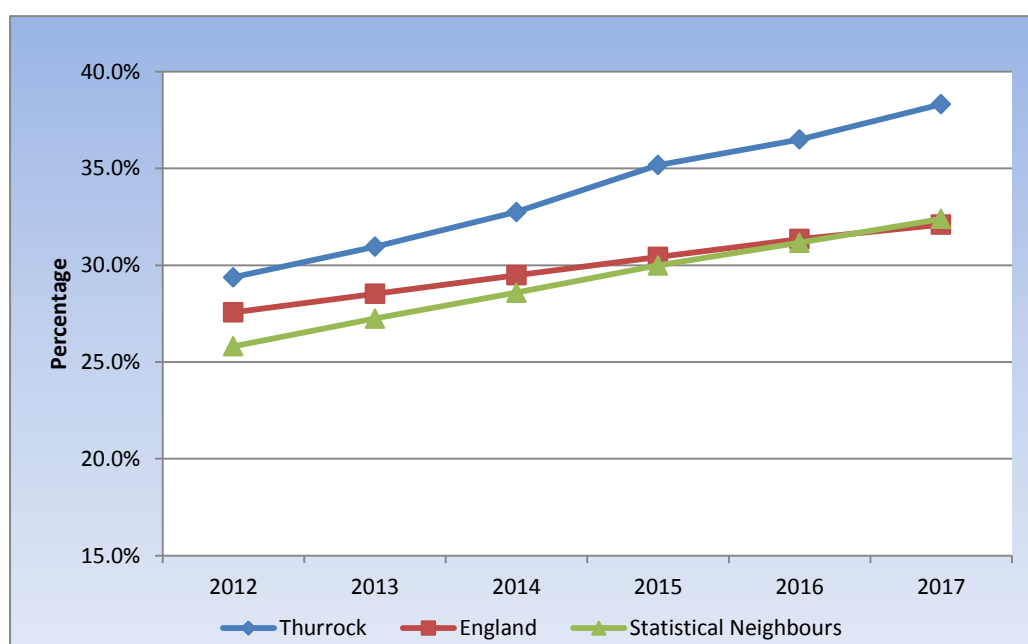
Table 4. Looked after children rates per 10,000 children by deprivation quintile and ethnic category, England sample

Deprivation quintile*	1	2	3	4	5	All
White	15	28	42	77	162	64
Mixed	27	47	62	103	164	99
Asian	7	18	15	21	34	22
Black	12	97	62	96	92	87
Other	46	90	52	41	111	74

Source: (Bywaters, Jones, & Sparks, 2017)

* 1= least deprived, 5 = most deprived

Figure 17. Proportion of primary school pupils from minority ethnic groups in Thurrock, England and statistical neighbours (2012 - 2017)



Sources: Department for Education School Census returns, 2012-2017

Special needs

There is a long-term downward trend in infant and child mortality rates in this country. Whilst this is extremely positive, one consequence is that the number of children with complex needs is growing as more children with severe health problems survive into later childhood. One recent report (Pinney, 2017) estimated that there has been an increase in the number of disabled children and young people of over 50% since 2004 (49,300 to 73,000). A small proportion of these children will become looked after because their disability is so severe that they cannot be cared for at home. At local authority level the number of such children is always likely to be small, meaning that the impact on the overall rate of LAC is modest. However, children with special needs may require highly specialised care, provided in high-cost placements meaning that a small change in the number of cases can have significant financial implications. Further analysis is required on this topic to understand the long-term trends, as well as the service and financial implications, locally.

Summary of the impact of demand factors on social care activity in Thurrock

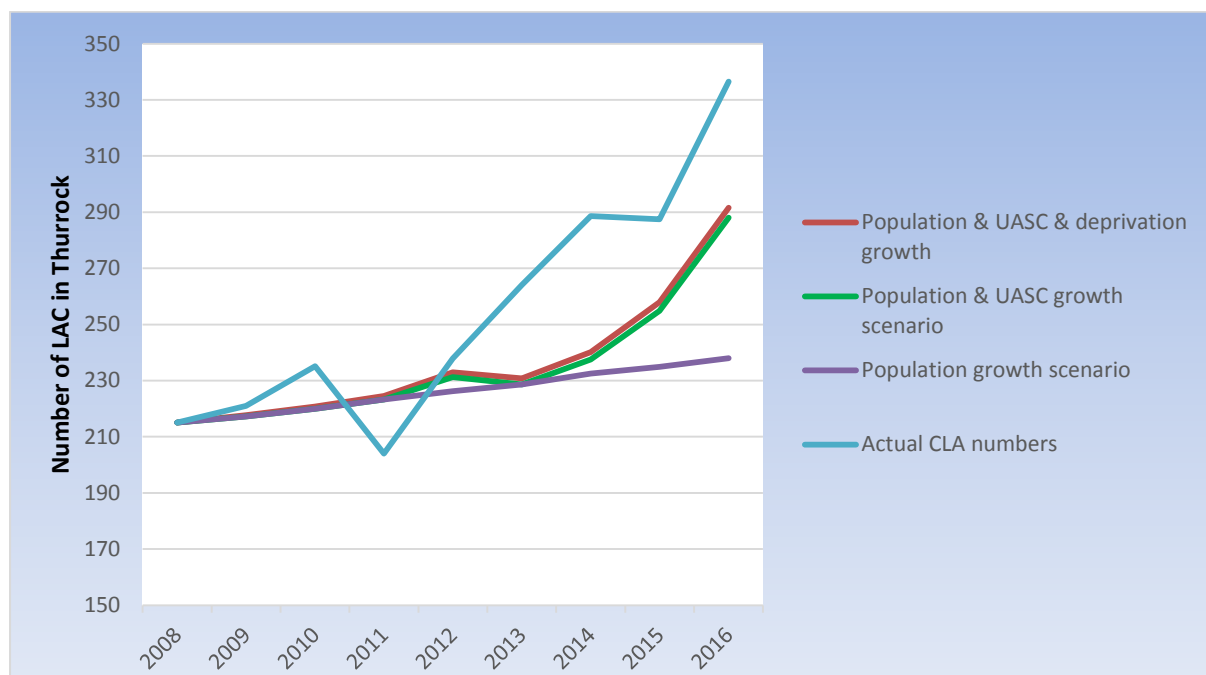
In trying to explain the growth in activity in children's social care in recent years, it is clear that a number of demand factors need to be considered. The most significant of these are population growth and Unaccompanied Asylum Seeking Children. A modest rise in the number of children living

in deprivation may also have contributed. More work is needed to understand the impact of a growing number of children with special educational needs and disabilities in Thurrock, though it is clear that this is likely to be a long-term cost pressure which drives up the complexity of care provided. The impact of increasing ethnic diversity is less clear. Further research is required to understand whether this is likely to increase demand.

In order to understand the potential impact of these demand-side factors on the numbers of LAC in Thurrock in recent years, we carried out modelling of various scenarios. The results are shown in Figure 18. This shows the actual number of LAC compared what might have been expected given known changes in demand factors. The impact of population growth on the expected number of LAC is illustrated by the purple line below¹. This suggests that a modest proportion of the rise in LAC numbers is likely to have been due to population growth.

The green line ('population & UASC growth') shows the number of Looked After Children that can be accounted for by population growth and UASC. The red line ('population & UASC & deprivation') additionally adds an estimate of the impact of increased levels of child poverty (see Appendix 1 for more details). Together these suggest that a significant proportion of the increase in numbers seen since 2008 can be attributed to these three factors: population growth, UASC, and increased deprivation. However, this leaves a significant amount of the growth unaccounted for. It is possible that unmeasured demand factors (such as ethnic diversity and SEND) contributed but it is also highly likely that supply-side factors have played a part in increasing the number of Looked After Children in Thurrock. Therefore, it seems likely not only that more children are in need of social care intervention than before but that the social care system has become more likely to intervene. The possible supply-side factors involved are discussed below.

Figure 18. Actual number of LAC in Thurrock vs modelled scenarios for different demand factors, 2008 – 2016



Sources: ONS (population data), Local Authority Information Tool (LAC and UASC numbers)

¹ The population growth model shows what the number of LAC been if the rate of LAC had stayed constant since 2008 and the population had grown in line with ONS mid-year estimates.

1.2.2. Supply factors

Our review of evidence found that the two main forces at work on the supply side are likely to be: changes in national policy frameworks and risk tolerance amongst staff; and reductions in key preventative services.

Policy change and risk tolerance

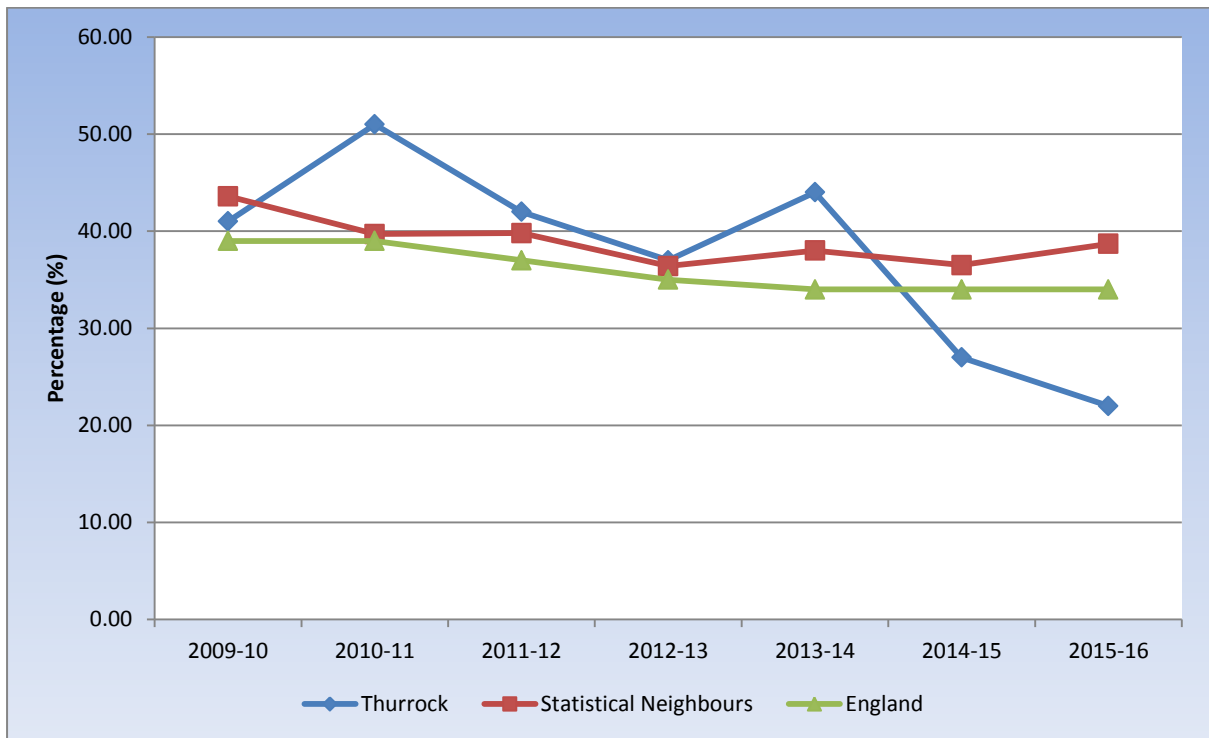
Nationally, new legislation, guidance and regulation have placed additional responsibilities on local authorities in recent years. Policy decisions of this kind are often informed by high profile, national events such as Serious Case Reviews or public inquiries. The widely-reported case of Baby Peter Connelly and the subsequent Munro Report on Child Protection (2011) are examples of how national policy responds to high profile events. Whilst it is hard to quantify the impact of such changes over the years, it is generally believed there has been a decline in risk tolerance in children's social care systems (Bywaters P. , et al., 2017) and that this has had an effect on the amount of activity in the national social care system. More specifically, the iMPower review of Thurrock's social care system commented on the existence of 'risk averse' culture in the Council and beyond, in the partners who refer into the social care system.

Preventative services

As noted above, investment in preventative services has been significantly reduced in recent years both nationally and in Thurrock. The most significant cut to preventative services occurred in 2015 after removal of £450,000 of CCG funding of early help services. This resulted in the decommissioning of services such as the Family Intervention Programme (FIP) and a tier 1 substance misuse service provided by Open Door. Quantifying the impact of such services is difficult but it is reasonable to assume that removing these preventative services (whilst at the same time spending more money on LAC) may have resulted in more children ending up being looked after, and that this might have been prevented if their families had been given more support at an early stage.

Even once children become looked after it is sometimes possible for them to return to their own families once significant issues have been resolved. There is evidence that this outcome is not as common as it used to be in Thurrock. Figure 19 shows a dramatic decline in the proportion of LAC returning to their families in Thurrock in recent years from a high of over 50% in 2010/11 to just 22% in 2015/16. More recent data were not available at the time of writing so further work is needed to understand if this trend has continued. The reasons for this decline also need to be investigated further. It is clear, however, that this trend could have had a significant impact on the number of children who remain looked after by the local authority.

Figure 19. Percentage of children returning home after a period of being looked after for Thurrock, England and statistical neighbours 2009/10 – 2015/16



1.3. How many children are likely to be in the social care system in future?

Forecasting future numbers is a challenging task. A survey of local authorities carried out by the Department for Education (Department for Education, 2016) found that most councils make limited use of forecasting methods or rely on simple extrapolations from previous budgets. However, attempting to understand future activity is crucial both for financial planning and for evaluating the impact of efforts to manage demand. For example, against a background of rapidly rising demand, it may be that modest growth is a sign that demand management efforts are having some effect.

For this report we have developed a new methodology for forecasting future activity. Technical details of the modelling methodology are given in Appendix 1. In summary, the models allow us to take into account not only historical trends but future factors such as population growth or changes to the cost of care. Inevitably, forecasting the future involves a significant degree of uncertainty. None of the forecasts presented below, therefore, should be considered definitive. Rather, the alternative scenarios represent a best estimate of what activity is likely to be in future if a given set of assumptions holds true.

1.3.1. The Thurrock Public Health Team Forecasting Model

A diagram representing the model used to forecast future demand and spend is shown below in Figure 20. The model forecasts activity and spend on Looked After Children only. Other elements of social care are not, at present included. However, given that it is estimated that around 70% of children's social care spending each year is directly or indirectly related to Looked after Children, modelling cost and activity in this area is particularly important.

The model presented here is designed to demonstrate the possible effects of changes in key factors which influence activity and cost. For example, as discussed above, one of the main drivers of increasing activity and cost in future will be population growth. Other factors include, the rate of children in care and the how long they stay in care, once they become looked after. Costs factors include the costs of placements (cost per week) and the staffing costs needed to work with the Looked After Children population.

Limitations of the forecasts

This model should be seen as a starting point, which illustrates possible future scenarios. A number of limitations should be kept in mind when examining its results:

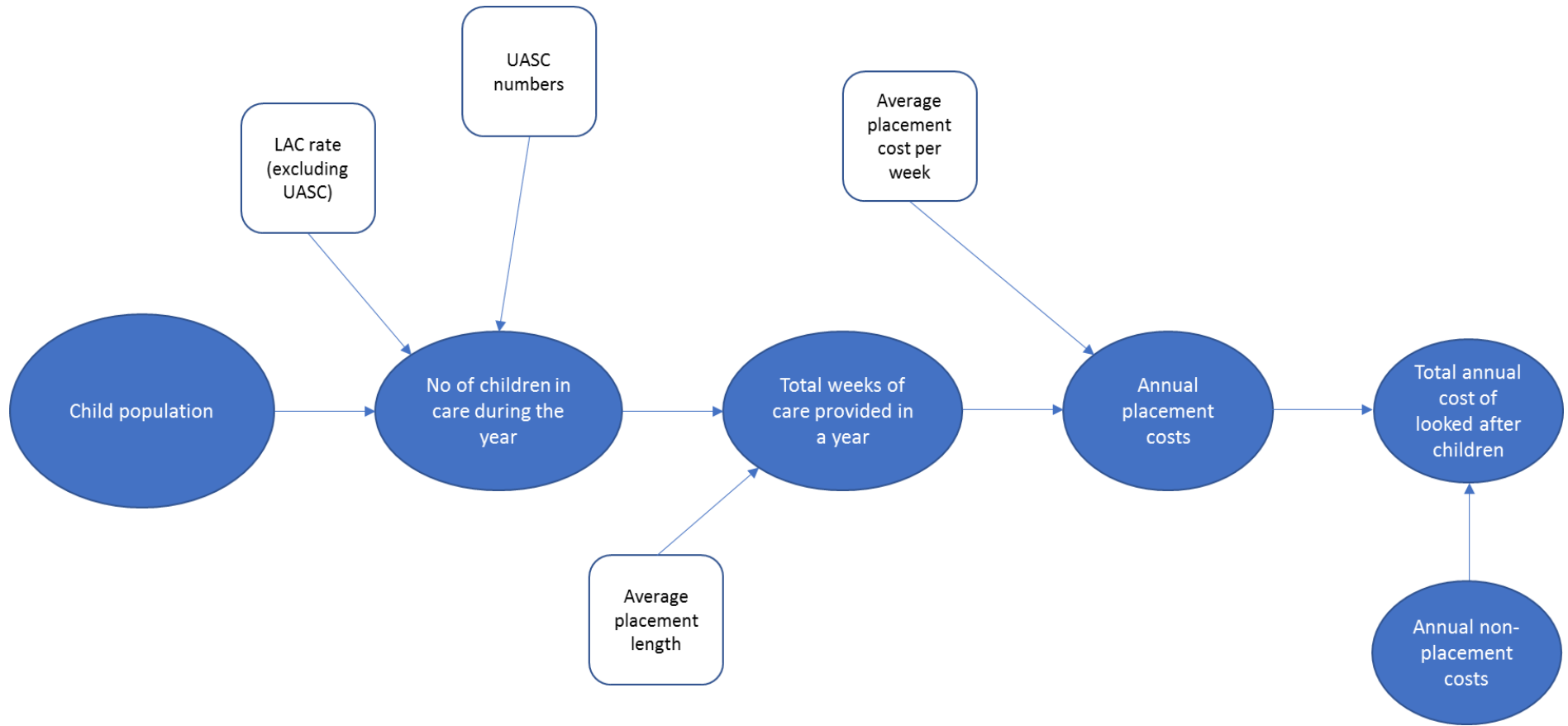
First, the outputs from any model are only as accurate as the assumptions which are used to construct it. This model is no different. The assumptions underlying the models are set out in an appendix so that readers can examine them critically.

Second, modelling dynamic systems such as children's social care involves a huge amount of complexity. The model here is greatly simplified. For example, placement costs have been modelled as a single, average figure although the real cost of placements varies hugely. This means that the model cannot, at present, take into account possible changes in the complexity of placement needs.

Thirdly, some of the data underlying this model are incomplete. In particular gaining an accurate picture of the number of weeks of care provided by the Council at present (and historically) has been very challenging as has getting accurate figures on the costs of placements across all budgets. In places where data are limited, estimates have been made based on the best available information.

Figure 20. Thurrock children's social care demand and cost forecasting model 2017

Page 70



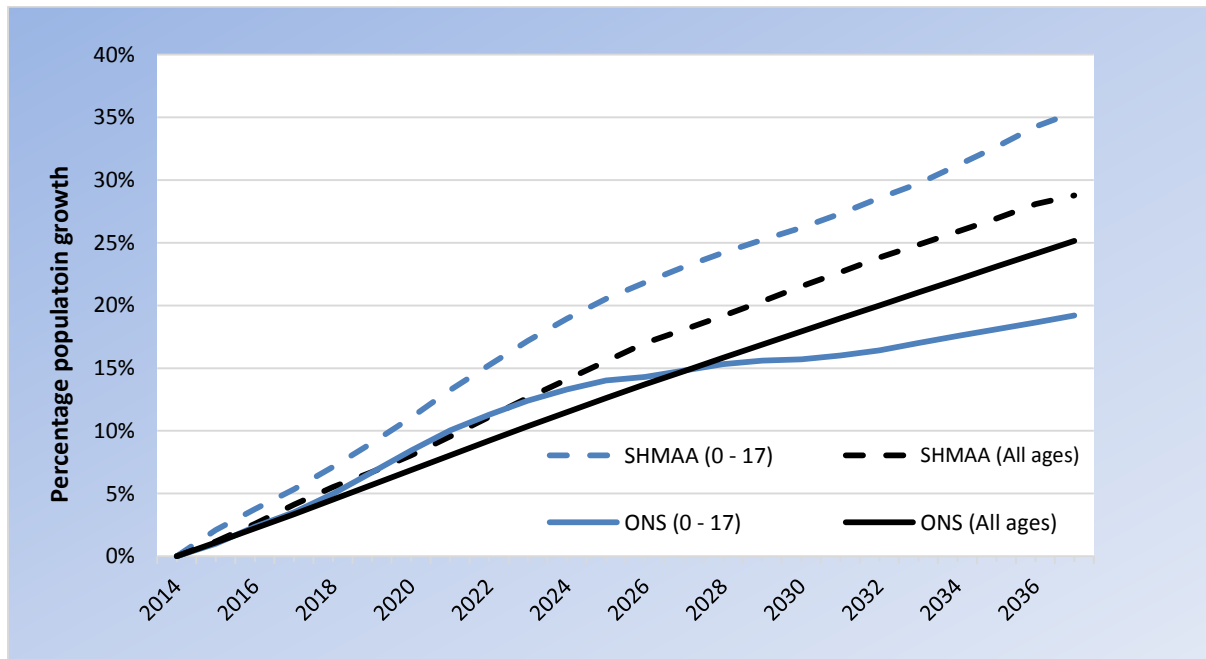
1.3.2. The impact of population growth

We have seen that Thurrock’s child population has grown at more than twice the national average rate over the past ten years. Forecasts for the future suggest that this rapid pace of growth is likely to continue. Figure 21 below shows projected population growth in Thurrock over the next 20 years. National estimates from the Office for National Statistics (ONS) are shown alongside local projections created for Thurrock as part of the Strategic Housing Market Assessment (SHMA). The SHMA projections take into account the high levels of job and housing growth expected to take place in Thurrock in the coming years and provide a more accurate forecast.

From the baseline year of 2014, SHMA projections suggest that the child population (0 – 17) will grow by 19 % by 2024 and 35.4% by 2037. By comparison, the child population of England is projected to grow by just 13.3% by 2024 and 19.2% by 2037 (Office for National Statistics, 2014); around half the rate of growth expected in Thurrock over the next 20 years.

...it seems inevitable that the rapid pace of growth of the child population expected in Thurrock... will continue to put significant pressures on the social care system over the next 10 – 20 years.

Figure 21. Projected population growth in Thurrock 2014 – 2037



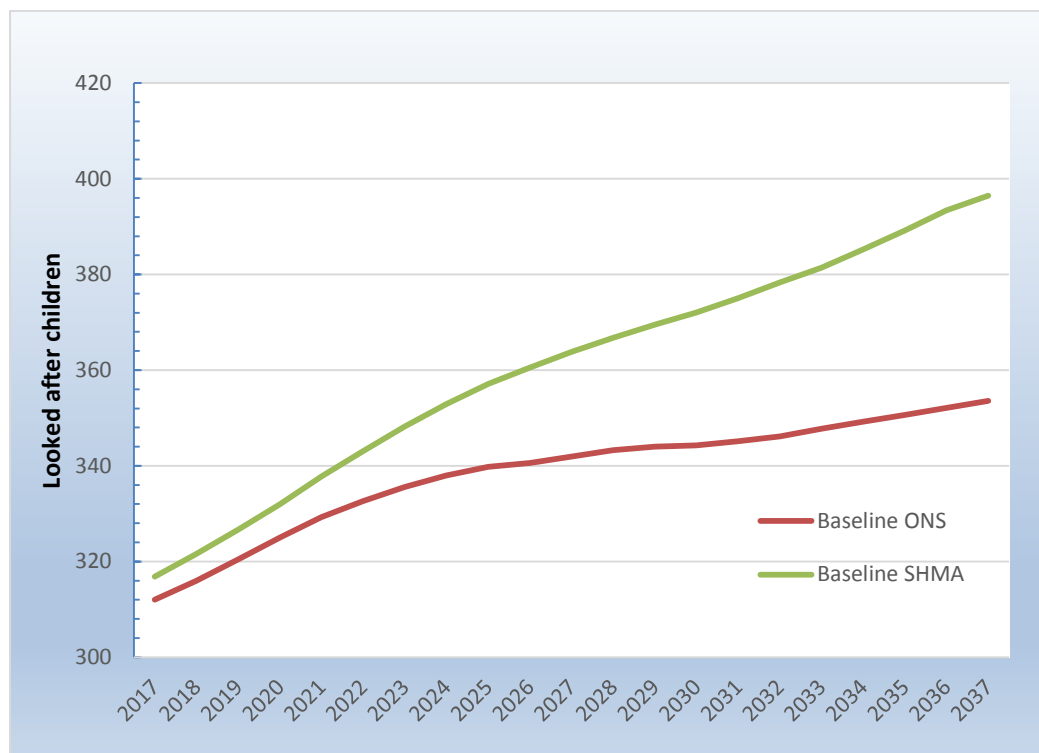
Source: Office for National Statistics (ONS) and Strategic Housing Market Assessment (SHMA)

It seems inevitable that this rapid pace of growth of the child population expected in Thurrock (around twice the national rate) will continue to put significant pressures on the social care system over the next 10 – 20 years. Moreover, this pressure will be much greater for Thurrock than is experienced nationally or in most other comparable areas since population growth is being driven by rapid economic and housing development.

All other things being equal, this rapid population growth will have a significant impact on the numbers of children in the social care system and the cost of providing social care services. Figure 22 and Figure 23 below show the potential impact of population growth on the numbers of Looked After Children in Thurrock and the resulting cost to the Council².

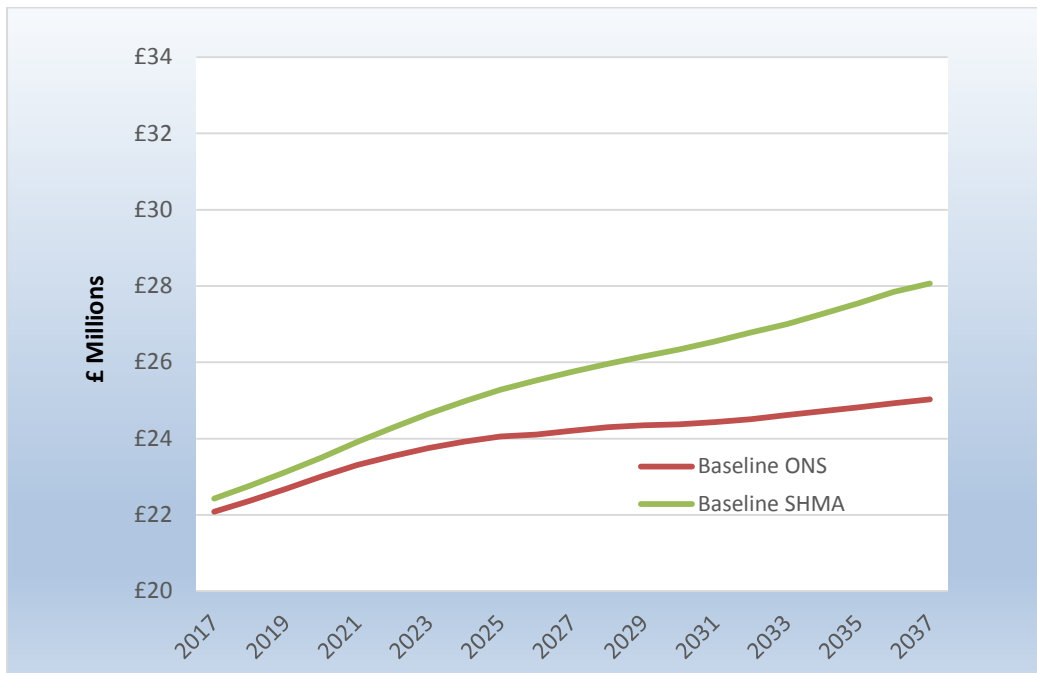
Even based on the (lower) ONS population projections, it is clear that the number of Looked After Children is likely to increase considerably in future. However, the forecasts based on SHMA population projections, suggest an even greater increase. The difference between these two forecasts can be taken as an indication of the impact of economic and housing growth in Thurrock beyond natural population growth. Based on the more realistic SHMA population projections Thurrock is likely to see 17% growth in the number of LAC and growth 15% in LAC-related costs over the next 10 years (2017 – 2027)

Figure 22. Forecast impact of population growth on the number of Looked After Children in Thurrock 2017 - 2037



² This model assumes that all other factors stay constant at the most recent available levels (August 2017). See Appendix 1 for more detail).

Figure 23. Forecast impact of population growth the cost of services for Looked After Children in Thurrock 2017 - 2037



1.3.3. The impact of changes in LAC rates

It is also possible to consider the possible impact of changes to the rate of Looked After Children in the Thurrock population. The factors affecting this rate are discussed above³. These models indicate what will happen if, as has happened over recent years, not only are there more children in the borough but those that live here are also more likely to end up being looked after.

Figure 24 below shows three possible scenarios illustrating the impact on the cost of LAC-related services in future. The 'Population growth only' scenario is the same as that presented in the section above on population growth. It assumes that LAC rates and costs stay the same but that the population grows in line with SHMA population projections. The other two scenarios show the impact of changes in the rate of children in care.

The 'Rising CLA' scenario assumes that LAC rates will continue to grow in line with the growth seen since 2011. The 'Falling CLA' scenario, on the other hand, assumes that over the next 5 years, LAC rates are brought in line with the current national average. Further details are given in Appendix 1.

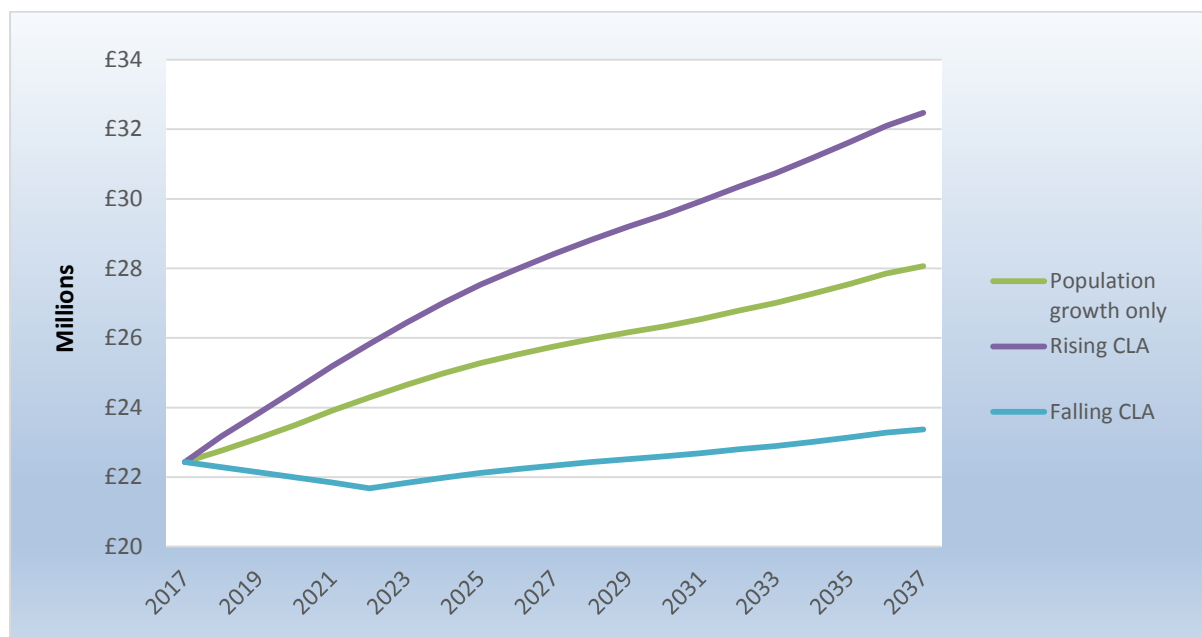
The results show that future costs are very strongly affected by the rate of children coming into care. Relatively small changes in rates can produce large changes in costs. The "Rising CLA scenario" illustrates the most likely course of future costs if trends over the past 5 – 10 years were to continue into the future. It forecasts a 27% increase in activity and cost over the next 10 years (17% due to population growth plus 10% due to increasing LAC rates). On the other hand, the Falling CLA scenario illustrates the potential gains to be made if LAC rates can be reduced to the national average⁴. Action is underway (detailed below in Section 2) to move Thurrock from the upper to the lower trajectory.

The "rising CLA scenario" illustrates the most likely course of future costs unless significant action is taken to reduce the rates of children becoming looked after. It forecasts a 27% increase in activity and £6 million of extra funding required in 10 years' time.

³ Here, the impact of changes in the LAC rate combined with population growth are illustrated without making assumptions about the specific demand and supply-side factors which might affect this rate. Further development of the model in future, would allow specific assumptions to be tested about factors such as deprivation rates and ethnic diversity.

⁴ This scenario assumes that the non-UASC rate of LAC is reduced to the current national average (56 per 10,000) over the next 5 years and then stays constant.

Figure 24. Forecast impact of changes in LAC rates and population growth on the cost of services for Looked After Children in Thurrock 2017 - 2037



Other demand-related factors, such as increasing numbers of children with special needs and changes in the ethnic make-up of the population, or deprivation rates are more difficult to quantify and have not, therefore, been included in the model at this stage. Further work could be done to incorporate the potential impact of these factors.

Potential future costs

If current trends in LAC rates over the past 5 – 10 years continue and if population growth is as expected, the cost of Looked After Children is expected to rise by £4M pounds over the next 5 years. By contrast, a reduction in CLA rates could see costs being reduced by £0.6M

Projected changes in LAC costs over the next 10 years

Scenario	3 years	5 years	10 years
<i>Rising CLA</i>	£2.08M	£4.01M	£5.98M
<i>Population growth only</i>	£1.07M	£2.22M	£3.32M
<i>Falling CLA</i>	-£0.44M	-£0.59M	£0.94M

2. How can we reduce the number of children in the social care system?

It is clear, then, that the number of children in the social care system is rising in Thurrock, faster than in other areas. Some of the reasons for this have been explored. It is also clear that the numbers in the system are likely to continue to grow in future unless significant action is taken. But what kind of action can be taken to prevent children from having to enter the social care system? This chapter attempts to answer that question.

First, we review the recommendations provided by iMPower following their analysis of Thurrock child social care system last year. Then, we present the results of an in-depth review of the research evidence in order to understand what works in prevention. In preparing this, the authors also met with key service leads across the social care system to understand how existing services operate and gather views on how services could be strengthened. The full results of the literature review are given in Appendix 2.

2.1. iMPower recommendations

The consultancy iMPower was commissioned by Thurrock Council in 2016 to identify opportunities to manage demand and cost in children's social services. Their review highlighted five main opportunities to influence demand and cost in Thurrock:

- 1. Ensuring the right demand is entering the system by working with partners**
This related to their finding that partner organisations such as schools and the police were making large numbers of enquiries and referrals into the Council when, in many cases, no action was required by social workers. Inappropriate referrals were taking up a lot of staff time.
- 2. Develop the prevention and early intervention offer**
An audit of Looked After Children cases found that in 49% of cases it might have been possible to prevent those children ending up in care if the right early support services were put in place. This highlighted the need for a more effective set of early intervention services.
- 3. Enable more active interventions to enable step down of care**
It was recommended that social workers' time should be freed up from carrying out large numbers of assessments, and allowing them to spend more time working with families to resolve their problems.
- 4. Reduce the proportion of agency staff;**
- 5. Increase the ratio of in-house foster care provision to reduce placement costs.**

The first three of these recommendations concern reducing the amount of activity in the system, whilst the last two are measures to reduce the cost of providing services.

2.2. Recent Developments

Following the review carried out by iMPower a number of developments have taken place in the service to improve sustainability. These include:

A new Prevention and Support Service: the new, integrated service brings together a number of previous prevention services including the Early Offer of Help and Troubled Families. This has also been integrated into Brighter Futures (see below).

Brighter Futures has been established to integrate Thurrock's early years and preventative services. The PASS service is part of Brighter Futures, which also includes Children Centres and the Healthy Families service (school nursing and health visiting). Efforts to create a more joined-up offer to children and families, with health, education and social care professionals working together, are designed to prevent issues from escalating to the level where social worker intervention is required.

Reductions in agency staffing have been pursued. Agency numbers now appear to be in steady decline. Efforts have also been made to recruit more foster carers from the local population, although the availability of in-house foster carers (and, indeed, any foster care placements) continues to be a significant challenge in Thurrock and nationally (see section 1, p14).

Targeting social work. A data system called Xantura has been commissioned to provide 'predictive analytics'. The system uses data from a variety of sources to flag up children at high risk, allowing social workers to intervene earlier and more effectively.

Signs of Safety. This is a strengths-based approach to child protection work which is being rolled out in Thurrock to improve case work and risk assessment.

2.3. What works in early help?

Early help describes interventions with children and families who are not at the stage of having statutory social worker intervention (CiN/CP or LAC). They are, by definition, preventative services designed to address problems at an early stage and prevent them from escalating. They are, therefore, critical to reducing the number of Looked After Children. Our review of evidence found a number of interventions which have been shown to work in this field.

2.2.1. Home Visiting

Home visiting programmes at the ante-natal and early post-natal stage can be effective in facilitating the development of a sensitive and empathetic relationship between the parent and young child which may forestall attachment and other relationship difficulties. There is enough evidence of its effectiveness for it to be recommended in NICE guidance (2017) as a form of early help for families showing possible signs of abuse or neglect.

Current provision of home visiting is provided to all families in Thurrock through the Healthy Families service which includes graded levels of intensity according to need. For those assessed as having greater needs, the service provides more intensive visiting from health visitors and a multi-agency response where appropriate, which may include social workers. Family Nurse Partnership, which used to be provided in Thurrock, is no longer commissioned as it was judged not to be cost effective in line with the results of UK trials (Barlow, Davis, McIntosh, Jarrett, & Mockford, 2007) (Robling, et al., 2015). To fill this gap, the newly commissioned Healthy Families Service provides an offer to young parents and more vulnerable families with more intensive support to replace this service.

2.2.2. Parenting Programmes

Parenting programmes aim to improve parenting skills and produce better outcomes for children. There is moderate to strong evidence that these can be effective in improving outcomes such as positive parenting behaviours, reduced behavioural problems in children and reducing risks of abuse and neglect. However, reviews of the evidence base also suggest that parenting interventions may be ineffective or insufficient in cases of high need and families with complex, multi-layered problems (Barlow, Johnston, Kendrick, Polnay, & Stewart-Brown, 2006).

Current provision includes three commissioned parenting programmes. Full details of the programmes and the evidence underpinning them can be found in Appendix 2. In summary:

- *Strengthening Families Strengthening Communities (SFSC)* is a 12-week group parenting course that covers all aspects of effective parenting, boundary setting, praise and warmth, and working with children's emotions. It uses peer support and includes additional support for the family in their home. In 2016/17, 252 families were referred into this programme but only 128 were able to go through the programme due to capacity constraints. This means some families were waiting for weeks or months before getting a place on the programme.
- *Mellow Mums* is an attachment and relationship based group intervention for mums who have babies and young children. In 2016/17, 21 mothers were referred into this programme and 18 went through the programme, with 10 on a waiting list. This suggests again that capacity is not sufficient to meet the current level of need.
- *Triple P* is a 13-week programme for parents with teenage children showing problematic behaviour. It seeks to avoid those behaviour patterns escalating further by giving parents practical strategies to help them build strong, healthy relationships, and to enable them confidently to manage their children's behaviour. No referrals were made into this programme in the past year. Therefore, although the provider is able to offer this service, it has not been utilised. As the evidence base underpinning this programme is relatively strong (See Appendix 2) the reasons for the lack of uptake of this programme need to be investigated.

2.2.3. Troubled Families⁵

This is a national programme which comes with its own funding from central government based on performance. It is intended to change repeating inter-generational patterns of poor parenting, abuse, violence, drug use, anti-social behaviour and crime in the most troubled families in the UK. Troubled families are defined as those that have problems and cause problems to the community around them, putting high costs on the public sector. Specific aims of the programme are to:

- get children back into school;
- reduce youth crime and anti-social behaviour;
- put adults on a path back to work;
- reduce the high costs these families place on the public sector each.

The Thurrock Troubled Families programme has a target to work with 1,240 families over a five-year period (2015 – 2020) and this year is due to work with 370 families. The programme was judged to be good during Ofsted inspection. Nationally, the effectiveness of this way of working is, however,

⁵ Some, though not all, families in the programme have children who are in the CiN/CP category meaning that this programme provides both Early Help and CP/CiN intervention.

highly politically controversial with some evaluations suggesting that it has little impact. Funding for Troubled Families is due to be withdrawn from 2020.

2.2.4. Recommendations on Early Help⁶

There is moderate to strong evidence that the current early help offer of home visiting and parenting support is effective in preventing children from entering the social care system or preventing their situations from escalating. It is clear that the capacity of these programmes is not sufficient to meet demand and many families have to wait for long periods before getting a place on the programme. It is recommended that capacity should be increased in line with current demand and then kept under review. Meeting current demand would require a 90% increase in capacity.

However, demand for these services depends on the awareness and confidence of the professionals who refer into these programmes. It is possible that more families could benefit from these programmes if they were referred into them. In particular, the lack of uptake of the Triple-P parenting programme needs to be investigated as this is a commissioned and evidence-based programme which is effective in preventing the escalation of behavioural problems in teenagers. It is also recommended that a review of referral practice should consider whether there are families with children on CiN/CP Plans or the families of Looked After Children who could benefit from these programmes. If more families could benefit it may be necessary to expand capacity of these programmes accordingly. Ultimately, these services will reduce pressure on the most high-cost parts of the social care system.

The evidence base underpinning Troubled Families is weaker. This programme is funded by central government, on a pay for performance basis. It is recommended that the methods used to achieve Troubled Families outcomes should be reviewed to consider whether the evidence-base presented above could be put into action to achieve Troubled Families outcomes. It is also important to note that there is a very significant financial risk for the Council related to Troubled Families funding may end in its current form from 2020. It is unclear at present whether it will be replaced with an alternative/similar funding stream.

There is a risk that the withdrawal of Troubled Families funding from 2020 could result in a further overall reduction in the funding for preventative services. This would continue long-term trend which has had the effect of driving up costs in the most expensive part of the system. However, if the funding is replaced in full or in part by a less restricted funding stream, it may be an opportunity to invest in interventions (at early help or CiN/CP stage) which have a stronger evidence base. It is recommended that plans be put in place to ensure that, as far as possible, changes to Troubled

There is a risk that the withdrawal of Troubled Families funding from 2020 could result in a further reduction in the funding for preventative services. This would continue a long-term trend which has had the effect of driving up costs in the most expensive part of the system.

⁶ There is significant overlap between 'Early Help' services and those appropriate for those at the CiN and CPP level. This section has focussed on those interventions which are primarily focussed on the pre-statutory stage of intervention. The Prevention and Support Service provides a number of services which are targeted more at the CiN/CP stage and these are outlined below (Section 2.4).

Families funding are used as an opportunity to strengthen demand-reducing services, rather than

Financial impact of recommendations on early offer of help

Increasing the capacity of parenting programmes is likely highly likely to make savings in other parts of the system by preventing cases from being escalated to CiN/CPP or LAC level. Though the amount of savings this would make is hard to estimate, the table below presents the capacity and costs of the existing programme and the recommended programme. Based on the figures below, in order to be cost neutral the expanded programme would need to prevent an additional 3.4 children from becoming looked after in order to be cost-neutral. That means that it would be cost neutral if the programme successfully prevents a child being taken into care for just 1 in 50 families accessing the programme. This makes it highly likely that the proposed expansion of parenting services would not just be cost neutral but cost saving overall.

Table 5. Estimated costs and savings for recommended action on edge-of-care

	Current service	Recommended service	Difference
Capacity	148	283	135
Cost	£260,000	£497,162	£237,162

allowing them to be weakened.

2.4. What works for Child in Need and Child Protection Plans?

In cases which progress beyond the Early Help stage, children may be put into the statutory categories of Child in Need (CiN) or (for higher risk cases) be put on a Child Protection Plan (CPP). For children, short-term care is provided by five Family Support Teams, who work with children under 12, and 1 Adolescent team. The principal aim of intervention at this stage is to prevent the children becoming looked after and, ideally, allow the matter to be stepped down.

There are a large number of possible interventions which can be put in place at this stage and it is important that they are tailored to suit the needs and issues of the children and families involved in each case. The summary presented below is organised by issues which can cause children to be designated as CiN or on a CPP. These include: domestic violence/abuse, substance misuse, and multiple issue interventions or 'edge of care' services. However, it is important to note that families often present with multiple issues and need holistic support which is adapted to their individual situations. For example, the Ofsted's report *Learning lessons from serious case reviews 2009–2010* (2010) which looked at the evaluations of 147 Serious Case Reviews where abuse or neglect were factors, found that domestic violence was present in 31% of cases, mental ill health in 23%, parental drug misuse in 19% and parental alcohol misuse in 14% of cases.

2.3.1. Domestic violence/abuse

Children can suffer serious long term problems as a result of domestic abuse even if they themselves have not been directly harmed or abused. According to NICE guidance, support should be provided

for both the non-abusing parent and child (NICE, 2014). In Thurrock, there is also provision of a service for perpetrators of domestic violence.

There is moderate evidence to support programmes which support non-abusing parents including: advocacy, skill building, counselling, and group therapy. For interventions to support children, the evidence is strongest for those programmes which include mothers and children, rather than children on their own. These include: mother-child psychotherapy, shelter-based parenting interventions; and parent-child interaction therapy.

Current provision of services related to domestic abuse includes two programmes:

- **STEPS (Success Through Effective Parenting Support):** aims to decrease the impact of domestic abuse on parenting. This is an eight-week programme of therapeutic and practical one-to-one support. Following the course, 96% reported feeling safer, and 92% of women reported having a better understanding the impact of abuse and violence on their children. The programme received 135 referrals in 2016/17 and there were significant waiting times (3 – 4 weeks) to get on the programme. The current service appears not to have capacity to meet all demand in a timely way. It is estimated that increasing capacity by 50 – 80% would be necessary to meet the current level of demand.
- **Domestic Violence Perpetrators Programme:** This is an intensive 26-week programme commissioned for just 10 men each year. It aims to change the behaviour of men who have been abusive towards their families. It is targeted at those cases which represented the highest risk to children, usually where children are on a CPP or are CiN. There is moderate evidence showing that this is effective in reducing abusive behaviour in future (Dobash, Dobash, Cavanagh, & Lewis, 1999) and local outcome data shows that 93% of partners report a cessation of abuse after completion of the programme. During interviews with service leads it was highlighted that the current number of places on this programme is not sufficient to meet demand and that many more people would benefit from this. There were 18 referrals to the service in 2016/17. This is beyond the capacity of the current service but it is also possible that social workers are not referring into the service because capacity is known to be an issue. The numbers who would actually benefit from the service are currently unknown.

Recommendation: Whilst this has not been identified as a major gap in existing services, there does appear to be scope to strengthen existing services based on the evidence available and it is recommended that an expansion of the capacity of the existing perpetrators scheme should be considered.

Financial impact of recommendations on domestic violence services

The cost of domestic violence to children’s social services has been estimated taking into account the fact that domestic violence has been found to be present in 40% of cases of child abuse (Walby, 2004). On this basis, it has been estimated that each incident of domestic violence costs, on average, £1,183 to social care (including the costs of social worker time and, in some cases, children becoming looked after), and a further £7,230 to the healthcare system. We estimate that implementing these recommendations would result in 163 incidents of domestic violence being prevented and associated cost savings (after the costs of the programme) of £125,926. In addition to the savings which would accrue to social care, a further £1.2M of savings are estimated for the healthcare system.

Table 6. Costs and savings for recommended action on domestic violence services

Programme	Current capacity	Recomm -ended capacity	Incidents of DV averted	Additional Cost	Estimated gross savings to social care	Net savings to social care
STEPS	75	135	144	£37,080	£170,300	£133,220
DV perpetrators	10	20	19	£30,000	£22,707	-£7,293
Total	85	155	163	£67,080	£193,006	£125,926

Sources: Walby (2009) Costs of domestic violence¹ and Dobash (1999)

2.3.2. Substance misuse

The evidence review found one programme, Parents Under Pressure (PUP), which addresses substance misuse as a component of children maltreatment. The programme addresses multiple domains of family functioning including parental psychopathology, child behavioural problems and parent-child relationships. A small trial of this programme in Australia found it to be effective in improving parenting, parent-child relationships and child behaviours in the families of parents who were on methadone treatment. An evaluation of the effectiveness and cost-effectiveness of this programme is currently underway in the UK.

Previous service: Previously, a tier-1 (advice and support) substance misuse service was commissioned as part of the Early Offer of Help. This was decommissioned in 2015 following funding reductions. Service leads have identified tier 1 substance misuse support as a gap in existing services.

Recommendation: Further work is needed to determine the size, scope and cost of a potential new substance misuse intervention focussed on families where children are at risk of (or already in) the social care system. The public health team should work with social care to consider whether existing child/adult DAAT services could be adapted in line with the evidence base to provide interventions specifically targeted at children at the CiN/ CPP stage.

2.3.3. Edge-of care services and multiple-issue interventions

Service leads consistently identified the lack of an 'edge-of-care' service as a major gap in existing provision in Thurrock. An edge-of-care service provides intensive support for families where there is a high risk of the child becoming looked after. In most cases, it is appropriate for such a service to address a range of issues simultaneously. Two reviews of the evidence for edge of care services (Bowyer & Wilkinson, 2013) (Asmussen, Doolan, & Scott, 2012) both identified Multi-Systemic Therapy (MST) and Functional Family Therapy (FFT) as having the strongest evidence base as effective edge-of-care interventions:

- **Multi-systemic therapy (MST)** is a family and community-based treatment programme originally designed for young offenders or young people aged 11-17 at risk of care who were demonstrating anti-social behaviours. The intervention has also been adapted specifically for families where there is child abuse and/or neglect (MST-CAN). Trials from the US have demonstrated that this can be effective in reducing the number of children taken into care by more than half from 30% to 14%. MST-CAN is now being piloted in several sites in the UK. Though no UK evaluations have yet been published, MST has been recommended in recently published NICE guidance on Child Abuse and Neglect (2017).
- **Functional Family Therapy (FFT)** is an intensive family-focused intervention targeted at young people aged 10 – 18 years who are still living at home but have persistent behavioural problems and/or substance misuse. Weekly sessions over a 3-4 month period aim to reduce disruptive communication patterns and encourage positive interactions among the family. Trials from the US have demonstrated that it can be effective in reducing violent crime by 30% and reoffending rates by 21% (Sexton & Turner, 2011). The impact on reducing care proceedings in the UK has yet to be determined. An FFT pilot started in Brighton in 2007 and the first UK randomised controlled trial is currently being conducted by Kings College in partnership with Brighton and Hove Youth Offending Services (Dixon, Lee, Ellison, & Hicks, 2015). Currently, two randomised controlled trials are underway in the UK in Brighton & Hove and Croydon.

Other interventions with an emerging evidence base are:

- **Step Change** combines elements of MST with FFT (Blower, et al., 2017). It was piloted across three London boroughs. Evaluation of Step Change found some improvement in follow-up measures such as offending and engagement in education though the numbers involved were too small for reliable analysis.
- **Short stay residential care for adolescents on the edge of care**
The UK has traditionally operated a binary model of care: at home or out of home. In other, particularly European countries, short-stay residential care (also known as respite care) is a more established part of children's social care systems. In some cases it can prevent full entry into care by offering respite and space to improve young people's relationships with their families. A number of local authorities in the UK are trialling this approach though further research is needed to evaluate its effectiveness and cost-effectiveness (Dixon, Lee, Ellison, & Hicks, 2015).

Previous service: The Family Intervention Project (FIP) was an intensive programme for families with multiple and complex issues. Work was completed with a key worker allocated to each family, working with them for between nine and 18 months. Though no controlled trials have been

identified, both local and national evaluations of FIP services were very positive. The national programme, for example, found that serious conduct problems with children dropped by one third (from 59% to 40%).

When it operated, the service cost £300,000 per year and supported 40 families per year (a cost of £7,500) per family. The service operated a waiting list, with an average waiting time of 30 days, indicating that there was more demand than the service could comfortably accommodate. This service was decommissioned following the withdrawal of CCG funding in 2015.

Recommendation

There is a clear gap in existing services in providing support to families where there is a known risk of children being taken into care. Such services will have a direct impact on the number of children becoming looked after. It is recommended that a service be designed and implemented for Thurrock based on the evidence summarised above (see also Appendix 2). The evidence base for preventing children being taken into care appears to be strongest for MST and FFT so it is recommended one of these should form the basis of an edge-of-care service. In order to prevent children being taken into care it is important that an edge of care service is able to respond quickly. Delays caused by waiting lists or assessment are likely to significantly reduce its effectiveness and cost-effectiveness.

Given the emerging nature of the evidence base in this field (particularly in the UK context) it is strongly recommended that a robust evaluation plan be developed (by children's social care in collaboration with public health) to ensure that the effectiveness and the cost-effectiveness of any new service can be demonstrated and that opportunities to learn from this are captured as fully as possible.

Financial impact of recommendations on an edge-of-care service

Implementing an MST-based edge-of-care service is likely to make savings through reducing the number of children being taken into care. A cost-effectiveness study of MST (Cary, Butler, Baruch, Hickey, & Byford, 2013) found that the intervention cost £2,285 per participant to implement. As of September 2017 there were 1,355 children in Thurrock classified as either CiN (1,074) or CPP (281). If 10% of them were suitable to receive the MST intervention, the total cost of the intervention would be in the region of £309,000.

Based on the estimated annual cost of a looked after child to the Council of £70,792, the service would only have to prevent an average of 4.4 children per year entering care to be cost-neutral. This would represent a 3.2% success rate for the service; that is, the service would only need to be successful in preventing 3.2% of the children it worked with from entering care each year in order to pay for itself. If we assume, in line with trials, that the intervention successfully prevents 16% of those in the programme for entering care, the net savings (see below) are estimated to be £1.2M per year, £650,000 of which would be directly cashable as reduced placement costs.

Table 7. Estimated costs and savings for recommended action on edge-of-care

No of eligible families	Cost per case	Total cost of service	Number of LAC prevented	Gross savings	Net savings	Cashable net savings
135.5	£ 2,285	£ 309,618	21.7	£ 1,534,771	£ 1,225,153	£ 649,331

2.5. What works for Looked After Children?

Even once children have been taken into care, it is possible to take action which will shorten their stay or prevent other children in the family becoming looked after. Our work has focused on two important ways in which this can be done and which have been identified as gaps in the current system.

First we consider ‘reunification’: the process of children returning to their families after a period of being in care. This was chosen as a focus because, as noted above (Figure 19, p27) there appears to have been a large and rapid decline in the proportion of children returning home to their families after a period of being looked after in Thurrock. iMPOWER also highlighted a cultural issue in Thurrock, where the journey of children through the system is seen as one-directional rather than opportunities to return children to their families being considered at every stage. Reunification work was also identified as a potential gap in existing services by some service managers and is an important way in which activity can be reduced in the most expensive part of the system.

A second issue explored in this section is preventing repeated occurrences of children being taken into care from the same family. This covers evidence relating to women who have repeated children removed from their care at birth. Again, this has been identified by service managers as a potential gap in existing services.

2.4.1. Reunification

Returning home is not always in the best interests of children in care (Wilkins & Farmer, 2015) (Biehal, Sinclair, & Wade, 2015) and the child’s welfare should be paramount in any decision to return a looked after child to their family. Nevertheless, there is evidence that certain practices and specific interventions can increase the likelihood of safe and effective reunification taking place. This includes:

Appropriate timing and thorough assessment

Reunification is less likely to be successful after a prolonged period in care (over 2-3 years) (Thoburn, Robinson, & Anderson, 2012). However, it has also been found that reunification is less likely to be successful if the child returns after a short stay in care (less than 3-6 months), perhaps because this may not allow sufficient time for change to occur in the family. This suggests that there may be an important window period between 6 months and 2 years in which reunification is most likely to be successful.

Assessing the suitability of a child and their family for reunification is a complex process. One study (Farmer, Sturgess, O’Neill, & Wijedasa, 2012) found that more thorough assessment was associated with greater stability for children returning home. In spite of this, 43% of children in their study returned home without a thorough assessment.

On-going work with parents and families of LAC

In most cases, if reunification is to be considered a possibility, significant changes have to occur in the lives of the parents or wider families of Looked After Children (Wade, Biehal, Farrelly, & Sinclair, 2010). At present there appears to be little systematic work with families who have had children removed; this was identified as a gap in existing services by some service leads. The evidence review supports on-going work with families after children have been removed as a way of promoting reunification. In particular the evidence supports:

- *Tailored support*: Matching services to underlying needs or problems, which may include mental health, housing, family counselling or substance abuse, has consistently been shown to improve family reunification (Choi & Ryan, 2007). The consensus is that programmes are also more likely to be effective if they are intensive and tailored to meet the needs of each member of the family (Ward, Brown, & Hyde-Dryden, 2014).
- *Timing and duration*: Support needs to commence as soon as possible after children are removed from the family, and should be proactive rather than reactive (Hyde-Dryden, et al., 2015). In order for reunification to be successful, interventions need to be delivered for long enough to bring about sustained changes in behaviour and the family situation.
- *Strong caseworker engagement* with the families whilst children are in care, increases the likelihood of reunification (Cheng, 2010).
- *Substance misuse support* for parents with substance misuse issues, support may help children to return home from care more quickly (Harwin, Alrouh, M, & Tunnard, 2014).
- *Parenting support*: There is some evidence from the US that parent mentoring programmes can be effective in promoting reunification (Enano, Friesthler, Perez-Johnson, & Lovato-Hermann, 2016).
- *Child emotional and behavioural support*: addressing emotional wellbeing of Looked After Children through Child and Adolescent Mental Health Services can be helpful for Looked After Children may be helpful in preventing re-entry into care (Thoburn, Robinson, & Anderson, 2012).
- *Ongoing monitoring and support post reunification*: Statutory guidance is clear that a child should continue to be supported and will often be treated as a child in need or under a Child Protection Plan once they return home. However, evidence reviews have found that interventions tend to end abruptly with no arrangements for long-term support or monitoring of children's circumstances (Hyde-Dryden, et al., 2015). Ongoing assessment of the family's needs is necessary as the full extent of many difficulties may not become apparent until some time into the return home.

Recommendation on reunification: Further work is needed to understand why the rates of children returning home after a period of being looked after appear to have fallen very significantly in recent years. There appears to be a gap in current services in working intensively with families who have had children removed. It is recommended that this should be considered within the design of a new edge-of-care service which could work intensively with families not only to prevent the removal of children but immediately following removal in order to promote reunification. This has the potential to reduce the length of LAC placements and thereby reduce the number of children in care. Extending the remit of other relevant services (e.g. drug and alcohol or domestic violence services) to work with families who have had children removed from their care should also be considered.

Financial impact of recommendations on reunifications

More detailed work is needed to understand trends in reunification in Thurrock in order to design a service which fits the needs in Thurrock. However, it is clear that increasing reunification could have a significant impact on costs by reducing the length of time that children remain in care.

Our analysis found that the average length of stay for children in care in Thurrock in any particular year is 35 weeks. This includes many children who stay for the full year (52 weeks) and some who stay for shorter periods. We estimate that reducing this average by just 1 week (to 34 weeks) would save £0.65M each year. Reducing the average to 32 weeks (an 8.6% reduction) would reduce costs by £1.93M per year, £1M of which would be reduced placement costs.

2.4.2. Repeated care proceedings

Recent research from the University of Lancaster has shown, for the first time, how common it is for mothers to have multiple children removed at birth (Broadhurst, et al., 2015). It was found that 24% of women who have a child removed at birth go on to have a second children removed from their care. Moreover, the likelihood of this happening is greatly increased for younger mothers. For women aged 16 – 17, when their first child is removed, there is a 32% chance of this being repeated. It also found that 40% of mothers who have multiple children removed at birth had themselves experienced being in care and substance misuse is a common reason for repeated care proceedings. In these cases only around 10% of children are ever reunited with their mothers compared to around 40% for the general population of Looked After Children. It is estimated that, at any one time in Thurrock's social care system, there are 10 – 15 women who have had multiple babies removed. Though the numbers are relatively small, these are both tragic and highly resource-intensive cases.

Our literature review found that there is a lack of robust evidence about what works to prevent repeated removals of children. However, an innovative programme called PAUSE has been piloted in a number of areas with central government funding. A national evaluation of the programme (McCracken, et al., 2017) found that it appeared to be effective in preventing women from going on to have further pregnancies and further removals of children. The programme worked by providing intensive support over an 18 months period to children who have had children removed at birth. Support was given by a dedicated practitioner though multi-agency support to address issues such as domestic violence, substance misuse and insecure housing was crucial to making this work. A cost-benefit analysis also found that this work saved large sums in social care costs after the initial 18 month intervention period. For a programme delivering Pause to 125 women, net savings (i.e. taking into account the cost of delivering the intervention) after 18 months were estimated at between £1.2 and £2.1 million.

Recommendation on preventing repeated care proceedings: A dedicated programme along the lines of PAUSE should be established for Thurrock. Given the relatively low number of women who are likely to require such a service, consideration should be given to working with neighbouring councils to commission this across a larger geographical area. Given that the evidence on this programme is emerging and that no controlled trials have been done, a robust evaluation plan should be put in place to determine effectiveness and cost-effectiveness of the programme locally.

Financial impact of recommendations on repeated care proceedings

Based on a cost-benefit analysis of Pause pilot programmes (McCracken, et al., 2017), we can estimate the cost-savings which might be possible in Thurrock. The cost of implementing the intervention was estimated at £20,202 per woman supported over the 18 months intervention period. We estimate, conservatively, that 15 women per year in Thurrock might be eligible for support from the scheme. This would mean the cost over 18 months would be £303,030. For this price, we would expect 2.55 – 4.35 further pregnancies to be prevented. Taking into account the estimated local costs of care, we would expect the programme to be cost-neutral in the second year of operation and thereafter it would save between £128,520 and £307,945 per year, of which £68,116 to £163,211 would be directly cashable as reduced placement costs.

3. Key findings and conclusions

3.1. Key findings

In this report we addressed a number of questions:

Is the number of children in the social care system rising faster in Thurrock than elsewhere?

Yes. The numbers have been rising steadily in recent years, particularly the number of Looked After Children. This increase has been greater than in other, similar areas. Over the past 12 – 18 months, however, LAC rates do appear to have levelled off or even started to decline. Much of this has been due to reductions in the numbers of Unaccompanied Asylum Seeking Children (UASC) though modest declines in the numbers of non-UASC looked after children have also been seen. It remains to be seen whether this is the beginning of a long-term change in the direction of trends.

Why are the numbers increasing in Thurrock?

Some of the increases in recent years have been due to more children being in need of support from social care (demand factors). In particular, the number of children living in Thurrock has increased and there has been a higher number of Unaccompanied Asylum Seeking Children entering the area in recent years. Over the last ten years, the child population in Thurrock has grown by 13.3% more than twice the national rate (6%) and Thurrock has had a much higher number of Unaccompanied Asylum Seeking Children entering the system than other comparable areas. At its peak in 2016, 21% of Thurrock LAC population was made up of UASC compared to a national rate of 6%.

It also seems likely, however, that the social care system has become more likely to intervene (supply-side factors). Some of this may be due to changes in national policy and guidance. However, the decline of investment in preventative services is also likely to have played a part; some children end up being taken into care when early and effective intervention might have prevented it. This is tragic for the children and their families involved and results in large, avoidable costs for the Local Authority.

How many children are likely to be in the social care system in future and how much will this cost?

There are huge potential costs if the trends of recent years were to continue unchecked. Based on local population projections and assuming that the trends of the past 5 – 10 continue, we estimate that the number of Looked After Children in Thurrock is likely to rise by around 27% to ~400, over the next ten years. That equates to extra costs of £4M per year in five years' time and nearly £6M per year in ten years' time.

Unless radical action is taken to upgrade demand-reducing services, the cost of children's social care could become increasingly unsustainable. Work is already underway to make this change.

Projected changes in LAC costs over the next 10 years			
Scenario	3 years	5 years	10 years
<i>Rising CLA</i>	£2.08M	£4.01M	£5.98M
<i>Population growth only</i>	£1.07	£2.22	£3.32
<i>Falling CLA</i>	-£0.44M	-£0.59M	£0.94M

Unless radical action is taken to upgrade demand-reducing services, the cost of children's social care will become increasingly unsustainable. Work is already underway to make this change.

How can the system be made more sustainable?

There are effective ways of preventing children from needing social care support. There are also interventions which can prevent their cases from escalating once they are in the system. Unfortunately, investment in preventative services has declined in recent years. This has had the effect of increasing costs in the most expensive part of the system (Looked After Children) and probably means that some children end up being taken into care when it might have been avoided. Making the system sustainable will require a significant rebalancing of investment towards prevention.

We estimate that around 70% of all social care spending is linked to the care of Looked After Children and that the majority of this (53%) of this is made up of placement costs (i.e. the cost of foster care, children's homes or other types of placement). Achieving financial sustainability will only be possible if these costs are reduced through a combination of preventing children from becoming looked after, reducing the amount of time that they stay looked after, and reducing the amount that is paid for placements.

3.2. Detailed Recommendations

Based on our analysis, we make the following three strategic recommendations for managing the pressures on the children's social care system in Thurrock:

1. Make a long-term strategic commitment to invest in prevention

To reduce the number of children in the social care system, a high-level strategic commitment must be made to re-balance investment towards preventative activities. In recent years investment in preventative services has been eroded whilst spending on high cost care placements has increased. By rebalancing investment towards preventative services, we can prevent children from ending up in care unnecessarily and, over time, relieve financial pressures on the social care system.

The change must be seen against the background of continuing cost pressures. It is likely that investing in preventative services will initially slow the growth in costs but may eventually lead to overall cost reductions. However, we have demonstrated that the cost of doing nothing is likely to be much higher than the costs of investing in preventative services.

2. Invest in the most effective preventative services

Making a strategic commitment to invest in prevention will only be effective if that investment is made in the right areas. Based on our review of evidence we recommend:

- **Early help:** Making efforts to expand the number of families benefiting from early help services by increasing capacity, strengthening referral systems and expanding inclusion criteria;
- **Children in Need & Child Protection Plans:** Investing in a new 'edge of care' service to work intensively with children at greatest risk of coming into care; expanding the capacity of existing domestic violence programmes; more targeted drug and alcohol outreach to families of Children in Need or on a Child Protection Plan
- **Looked After Children:** Working systematically with families who have had children removed to increase the chances of Looked After Children being reunited with their families; providing intensive support to mothers (especially young mothers) who have had babies removed from their care to prevent this re-occurring in future.

Table 8. Detailed recommendations for increased investment in preventative services

Stage in the system	Recommended action	Expected Impact
Early Help	<p>Expand the capacity of existing parenting programmes</p> <p>An expansion of capacity by around 90% is needed to meet existing demand and eliminate waiting lists.</p> <p>Keep capacity under review to ensure that it is meeting demand from other parts of the social care system.</p>	<p>These services will prevent escalation to CiN/CP/LAC stage or enable de-escalation for families already at those stages. Reducing waiting times is likely to make them more effective by ensuring that help truly is given early in the process. It will also give social workers more confidence to refer into these services and may, therefore, increase demand further.</p>
	<p>Review referral into parenting programmes</p> <p>Review practice of referral into early help parenting programmes to ensure that all families who could benefit from these services (at any stage of the social care process) are appropriately referred. In particular, investigate the lack of referrals into Triple-P parenting programmes.</p>	<p>Better use of existing services (especially Triple-P) will prevent escalation to CiN/CP/LAC stage or enable de-escalation for families already at those stages.</p>
	<p>Consider expanding inclusion criteria</p> <p>Consider expanding the availability of some early help services to families of CiN/CP children and families who have had children removed. Capacity may need to be expanded accordingly.</p>	<p>Prevent escalation to LAC and promote children returning home to their families.</p>
	<p>Ensure end of TF funding is used to strengthen prevention</p> <p>Plan for changes to Troubled Families funding to ensure that this does not result in further disinvestment in prevention. Future changes to the service should be based on the best available evidence and designed to prevent children from becoming looked after.</p>	<p>Ensure that the balance of investment is moving towards prevention rather than away from it, reducing costs in more expensive parts of the system.</p>
Child in Need & Child Protection Plan	<p>Establish an “edge of care” service</p> <p>Establish a new “edge of care” service to work intensively with children who are at risk of becoming looked after.</p> <p>Design this service based on Functional Family Therapy or Multi-Systemic Therapy which have the strongest evidence base.</p> <p>Put in place a robust evaluation plan to determine cost-effectiveness.</p>	<p>Prevent children in the social care system (CiN and CPP) from becoming looked after.</p>

	<p>Expand existing domestic violence programmes Expand the two existing programmes (for victims and perpetrators) to meet demand. This would commissioning an additional 60 places for victims and an additional 10 places for perpetrators.</p>	Reduce risk to parents and children who are victims of domestic violence. Reduce the impact of domestic violence on children and prevent escalation of their cases within the social care system.
	<p>Targeted drug and alcohol outreach to families of Children in Need or on a Child Protection Plan</p>	Prevent escalation and reduce the duration of social care intervention by dealing with underlying substance misuse
<i>Looked after children</i>	<p>Invest in services which allow Looked After Children to return home Work systematically with families of children who have been taken into care to resolve problems and, where possible, to allow them to the children to return home. Consider including this within the remit of the edge-of-care service. Design of this service should begin with an in-depth analysis of why rates of children returning home to their families appear to have declined significantly in recent years.</p>	Increase the number of Looked After Children able to return home to their families and reduce the amount of time they spend in care and reduce costs significantly.
	<p>Prevent mothers from having multiple babies taken into care Commission the Pause programme to provide intensive support to mothers who have had a baby removed. Put in place robust evaluation of the programme to ensure effectiveness and cost-effectiveness.</p>	Reduce the number of mothers who have multiple babies removed from their care and reduce the number of children taken into care.

3. Improve information on activity and spending

Reducing the number of children in the system and controlling costs can only be achieved if reliable activity and financial information are available, allowing us to understand current patterns of activity and spending. For the purposes of this report, a new way of forecasting future activity and spending has been developed. This kind of forecasting can help to make good strategic decisions and financial plans for the future. The model used here is relatively simple and its accuracy could be improved with more work in future. Moreover, a number of weaknesses in existing data systems have been identified during the course of this report, which make effective planning and cost control difficult.

Table 9. Detailed recommendations for improving information on activity and spending

Recommendation	Details	Expected impact	Responsible
Monitor trends in key cost drivers	Key cost drivers identified in this report are: <ol style="list-style-type: none"> 1. The numbers of weeks of care provided by the Council over the course of a year; 2. The average length of stay of children in care; 3. The average cost of placements of different kinds. 	Monitoring trends in key cost drivers will help to control costs and evaluate the effectiveness of preventative strategies	Performance, quality and business intelligence team
Link data on activity and spend	Currently, data on activity and spending are kept separately. Work needs to be done to link these data systems and regularly analyse the data together	Improved understanding of the costs of different types of social care activity allowing more efficient ways of working to be devised and costs driven down.	Performance, quality and business intelligence team
Carry out a financial deep dive on Looked After Children	A deep dive is required to get a more accurate understanding of all the costs associated with Looked After Children including the costs of different types of placement, the costs of staff time and travel expenses etc.	A better understanding of all the costs associated with Looked After Children will allow costs to be controlled more effectively in this crucial area.	Finance
Investigate the decline in the number of children returning to their families after a period of being looked after	This may be an important factor increasing the number of children in care and, therefore costs. Up-to-date data is required to understand the most recent trends. Further data analysis and case-note audit may be required to understand the reasons for these changes	The results of this analysis should be used to increase the likelihood of LAC returning to their families.	Performance, quality and business intelligence team
Develop and update the forecasting model	There are several ways in which the model could be develop to be more accurate including: adding	The model can inform strategic planning as well as helping to	Public health and children’s social care

	more detailed and accurate financial information on placement and other social care costs; modelling the impact of changes in deprivation rates and numbers of children with Special Educational Needs and Disabilities	predict and evaluate the effectiveness of prevention strategies.	
--	---	--	--

Bibliography

- APPGC. (2017). *No Good Options*. London: All Party Parliamentary Group for Children.
- Asmussen, K., Doolan, M., & Scott, S. (2012). *Intensive interventions suitable for children on the edge of care: Report and recommendations for social finance*. London: Kings College, National Academy for Parenting Research.
- Barlow, J., Davis, H., McIntosh, E., Jarrett, P., & Mockford, C. S.-B. (2007). Role of home visiting in improving parenting and health in families at risk of abuse and neglect: Results of a multicentre randomised controlled trial and economic evaluation. *Archive of Disease in Childhood*, 229-233.
- Barlow, J., Johnston, I., Kendrick, D., Polnay, L., & Stewart-Brown, S. (2006). Individual and group-based parenting programmes for the treatment of physical child abuse and neglect. *Cochrane Database of Systematic Reviews*(3), Art. No.: CD005463. doi:10.1002/14651858.CD005463.pub2.
- Bellis, M., Hughes, K., Leckenby, N., Hardcastle, K., Perkins, C., & Lowey, H. (2013). Measuring mortality and the burden of adult diseases associated with adverse childhood experiences in England: a national survey. *Journal of Public Health*, 81 - 91.
- Bellis, M., Hughes, K., Leckenby, N., Hardcastle, K., Perkins, C., & Lowey, H. (2014). Measuring mortality and the burden of adult disease associated with adverse childhood experiences in England: a national survey. *Journal of Public Health*, 37(3), 445-454.
- Biehal, N., Sinclair, I., & Wade, J. (2015). Reunifying abused or neglected children: Decision-making and outcomes. *Child Abuse & Neglect*, 49, 107-118.
- Blower, S., Dixon, J., Ellison, S., Ward, J., Thorley, K., & Gridley, N. (2017). *Step Change: an evaluation*. London: Department for Education.
- Bowyer, S., & Wilkinson, J. (2013). *Evidence scope: Models of adolescent care provision*. Dartington: Research in Practice.
- Broadhurst, K., Alrouh, B., Yeend, E., Harwin, J., Shaw, M., Pilling, M., . . . Kershaw, S. (2015). Connecting Events in Time to Identify a Hidden Population: Birth Mothers and Their Children in Recurrent Care Proceedings in England. *The British Journal of Social Work*, 45(8), 2241-2260.
- Brook, J., McDonald, T., & Yan, Y. (2012). An analysis of the impact of the Strengthening Families Program on family reunification in child welfare. *Children and Youth Services Review*, 34(4), 691-695.
- Bywaters, P., Brady, G., Bunting, L., Daniel, B., Featherstone, B., Jones, C., . . . Webb, C. (2017). Inequalities in English child protection practice under austerity: A universal challenge? *Child & Family Social Work*, 1 - 9.
- Bywaters, P., Brady, G., Sparks, T., & Bos, E. (2016). Child welfare inequalities: new evidence, further questions. *Child & family social work*(21), 369-380.

- Bywaters, P., Jones, C., & Sparks, T. (2017). *Identifying and Understanding Inequalities in Child Welfare Intervention Rates: comparative studies in four UK countries*. Child Welfare Inequalities Project.
- Carpenter, J., Jessiman, T., Patsios, D., Hackett, S., & Phillips, J. (2016). *Letting the Future In: a therapeutic intervention for children affected by sexual abuse and their carers – an evaluation of impact and implementation*. NSPCC.
- Cary, M., Butler, S., Baruch, G., Hickey, N., & Byford, S. (2013). Economic Evaluation of Multisystemic Therapy for Young People at Risk for Continuing Criminal Activity in the UK. *PLoS One*, *8*(4), e61070. doi:10.1371/journal.pone.0061070
- Cheng, T. (2010). Factors associated with reunification: a longitudinal analysis of long-term foster care. *Children and Youth Services Review*, *32*(10), 1311-1316.
- Choi, S., & Ryan, J. (2007). Co-occurring problems for substance abusing mothers in child welfare: matching services to improve family reunification. *Children and Youth Services Review*, *29*(11), 1395-1410.
- Cleaver, H., Unell, I., & Aldgate, J. (2011). *Children's needs: parenting capacity: child abuse: parental mental illness, learning disability, substance abuse and domestic violence* (2nd ed.). London: Stationery Office.
- D'Andrade, A., & Nguyen, H. (2014). The relationship between parents' use of specific services, treatment problems, and reunification with children placed in foster care. *Journal of Public Child Welfare*, *8*(1), 51-69.
- Dawe, S., & Harnett, P. (2007). Improving family functioning in methadone maintained families: results from a randomised controlled trial. *Journal of Substance Abuse Treatment*, *32*, 381-390.
- Department for Education. (2016). *Children's services: Spending and delivery*. London: DfE.
- Department for Education. (2016). *Children's Social Care Innovation Programme*. London: DfE.
- DfE. (2015). *Working together to safeguard children*. London: Department for Education.
- Dixon, J., Lee, J., Ellison, S., & Hicks, L. (2015). *Supporting Adolescents on the Edge of Care: The role of short term stays in residential care*. London: Action for Children.
- Dobash, R., Dobash, R., Cavanagh, K., & Lewis, R. (1999). A research evaluation of British programmes for violent men. *Journal of Social Policy*, *28*(2), 205-233.
- Enano, S., Friesthler, B., Perez-Johnson, D., & Lovato-Hermann, K. (2016). Evaluating Parents in Partnership: A preliminary study of a child welfare intervention designed to increase rates of reunification. *Journal of Social Service Research*. doi:10.1080/01488376.2016.1253634.
- Farmer, E., & Patsios, D. (2016). *Evaluation Report on Implementing the Reunification Practice Framework*. Bristol: University of Bristol.

- Farmer, E., & Wijedasa, D. (2012). The Reunification of Looked After Children with their Parents: What Contributes to Stability? *British Journal of Social Work*, 44(2), 348-366.
- Farmer, E., Sturgess, W., O'Neill, T., & Wijedasa, D. (2012). Achieving Successful Returns from Care: What Makes Reunification Work? *The British Journal of Social Work*, 42(5), 995-997.
- Harrow Council. (2017). *Review of Children's Social Care*. Harrow Council.
- Harwin, J., Alrouh, B., M, R., & Tunnard, J. (2014). *Changing Lifestyles, Keeping Children Safe: an evaluation of the first Family Drug and Alcohol Court (FDAC) in care proceedings*. London: Brunel University. Retrieved from http://www.nuffieldfoundation.org/sites/default/files/files/FDAC_May2014_FinalReport_V2.pdf
- Hood, R., Goldacre, A., Grant, R., & Jones, R. (2016). Exploring Demand and Provision in English Child Protection Services. *British Journal of Social Work*, 46(4), 923-941.
- Horgan, J. (2011). *Parental substance misuse: Addressing its impact on children: a review of the literature*. Dublin: Stationery Office.
- Hyde-Dryden, G., Gibb, J., Lea, J., Buckley, E., Holmes, L., Wallace, E., . . . Lawson, D. (2015). *Research report: Improving practice in respect of children who return home from care*. London: Department for Education.
- Lindsay, G., Strand, S., Cullen, M., Cullen, S., Band, S., Davis, H., . . . Evans, R. (2011). *Parenting Early Intervention Programme Evaluation*. London: Department for Education.
- Macdonald, G., Higgins, J., Ramchandani, P., Valentine, J. B., Klein, P., O'Daniel, R., . . . Taylor, M. (2012). Cognitive-behavioural interventions for children who have. *Cochrane Database of Systematic Reviews*, Art.No.:CD001930. doi:10.1002/14651858.CD001930.pub3
- McCracken, K., Priest, S., FitzSimons, A., Bracewell, K., Torchia, K., Parry, W., & Stanley, N. (2017). *Evaluation of Pause*. London: Department for Education.
- NICE. (2014). *Public Health Guideline PH50: Domestic violence and abuse: multi-agency working*. Retrieved from National Institute for Health and Care Excellence: <https://www.nice.org.uk/Guidance/PH50>
- NICE. (2017). *NICE Guidance NG67: Child Abuse and Neglect*. Retrieved from National Institute for Health and Care Excellence: <https://www.nice.org.uk/guidance/ng76>
- NSPCC. (2015). *Returning Home from care - Learning from case reviews*. NSPCC.
- Office for National Statistics. (2014). *Subnational Population Projections for England: 2014-based projections*. Retrieved from Office for National Statistics: <https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationprojections/bulletins/subnationalpopulationprojectionsforengland/2014basedprojections>
- Ofsted. (2010). *Learning lessons from serious case reviews 2009–2010*. London: Ofsted.

- Pinney, A. (2017). *Understanding the needs of disabled children with complex needs or life-limiting conditions*. Council for Disabled Children.
- Robling, M., Bekkers, M.-J., Bell, K., Butler, C., Cannings-John, R., Channon, S., . . . Hood, K. (2015). Effectiveness of a nurse-led intensive home-visitation programme for first-time teenage mothers (Building Blocks): a pragmatic randomised controlled trial. *The Lancet*, 146-55.
- Sanders, M., Pidgeon, A., Gravestock, F., Connors, M., Brown, S., & Young, R. (2004). Does parental attributional retraining and anger management enhance the effects of the Triple P-Positive Parenting Program with parents at risk of child maltreatment? *Behavior Therapy*, 35(3), 513-535.
- Schrader-McMillan, A., & Barlow, J. (2017). *Improving the effectiveness of the child protection system - A review of the literature*. Oxford: University of Oxford.
- Sexton, T., & Turner, C. (2011). The effectiveness of functional family therapy for youth with behavioural problems in a community practice setting. *Couple and Family Psychology*, 1(5), 3-15.
- Thoburn, J., Robinson, J., & Anderson, B. (2012). *Returning children home from public care*. London: Social Care Institute for Excellence Research. Retrieved from <http://www.scie.org.uk/publications/briefings/briefing42/>
- Thomas, R., & Zimmer-Gembeck, M. (2012). Parent-child interaction therapy: An evidence-based treatment for child maltreatment. *SAGE*, 17(3), 253-266.
- Wade, J., Biehal, N., Farrelly, N., & Sinclair, I. (2010). *Maltreated children in the looked after system: a comparison of outcomes for those who go home and those who do not*. London: Department for Education.
- Walby, S. (2004). *The Cost of Domestic Violence*. Women and Equality Unit (DTI).
- Ward, H., Brown, R., & Hyde-Dryden, G. (2014). *Assessing Parental Capacity to Change when Children are on the Edge of Care: An Overview of Current Research Evidence*. London: Department for Education.
- Whalley, P. (2015). *Child neglect and Pathways Triple P: an evaluation of an NSPCC service offered to parents where initial concerns of neglect have been noted*. London: NSPCC.
- Wilkins, M., & Farmer, E. (2015). *Reunification: an evidence-informed framework for return home practice*. London: NSPCC.

Appendix 1. Technical details of the Thurrock Public Health Team Forecasting model

Approach to modelling future demand for children's social care

The forecasts of future demand presented in Section 1.3 were developed using system dynamic modelling techniques. This approach uses a mathematical model to represent the forces which influence activity and cost in the children's social care system. Specialist software (*Vensim*) was used to develop these forecasts. The model included a simplified version of the factors which influence the number of Looked After Children (LAC) in Thurrock. The model is represented graphically below in Figure 26.

The rationale for this model includes the assumption that the size of the child population in Thurrock is a key driver of the number of the number of children LAC. The exception to this assumption is the number of Unaccompanied Asylum Seeking Children (UASC) in the LAC population. The number of UASC is assumed to be independent of the size of the local population. UASC numbers are influenced by the numbers arriving in Thurrock and the agreement to distribute UASC across the region. We modelled the size of the child population in future based on two population forecasts, the standard sub-national forecasts produced by the Office for National Statistics and the Thurrock-specific forecasts produced as part of the Strategic Housing Market Assessment (SHMA). The SHMA forecasts take into account the projected economic and housing growth and are likely to be a more accurate estimate of future population.

The total weeks of care provided by the Council in a year is influenced not only by the number of LAC but also by how they remain in care, whilst annual placement costs are a function of the number of weeks of care provided and the average cost of placements. Both average placement length and the average placement cost were estimated based on real social data from the 2016-17 financial year.

Non-placement costs were estimated from real social care financial data (2016-17) by subtracting placement costs from the total estimated spend on Looked After Children. Our model assumes that non-placement costs represent a fixed proportion (47%) of the total spend on LAC and that they vary in line with placement costs.

Forecast scenarios

The results of any model are only as accurate as the assumptions which underlie it. Our modelling technique allowed us to simulate the impact of changes in key assumptions by running multiple scenarios and comparing the results. The model results are only as accurate as the assumptions (or inputs) underlying it. The forecasts presented here included four scenarios with different assumptions made for the inputs underlying each model. Details are given in the Table 10 below.

Table 10. Assumptions made in model inputs for forecasting models

Model inputs	Model			
	Baseline ONS	Population growth only	Rising LAC	Falling LAC
Child population	ONS mid-year	SHMA	SHMA	SHMA
Non-UASC rate	constant (66)	constant (66)	Rising logarithmic trend based on actual rates from 2011 – 2017 (see Figure 25)	Falls to national non-UASC rate (56) over 5 years then stays constant
Number of UASC	constant (38)	constant (38)	constant (38)	constant(38)
Average length of stay	constant (35 weeks)	constant (35 weeks)	constant (35 weeks)	constant (35 weeks)
Average placement cost per week	constant (£1,072)	constant (£1,072)	constant (£1,072)	constant (£1,072)
non-placement LAC costs	47% of total LAC spend	47% of total LAC spend	47% of total LAC spend	Constant at 2017 levels (£10.54M)

Figure 25. Non-UASC LAC rate, projected trend for Thurrock 2011 – 2037

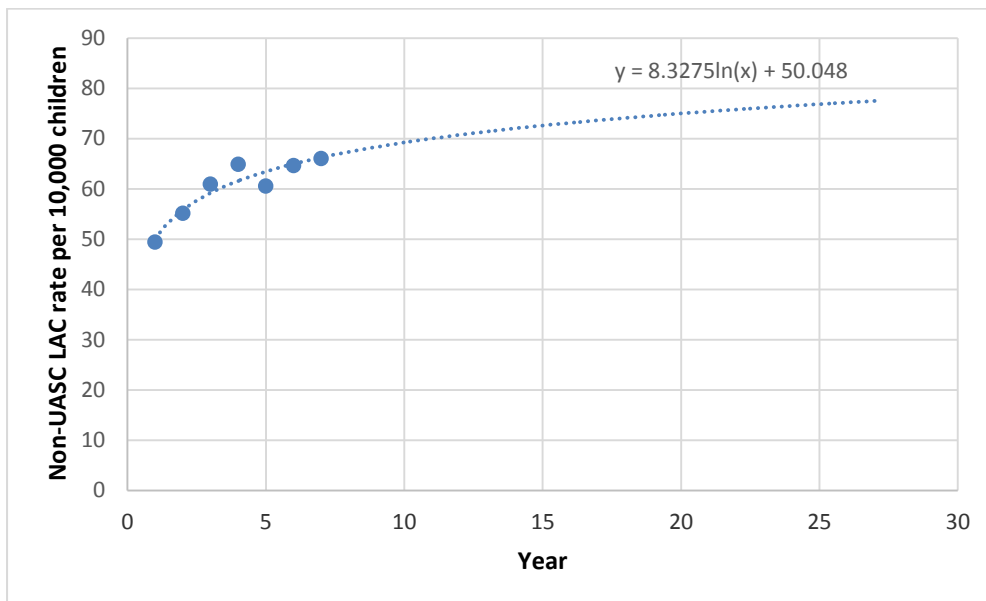
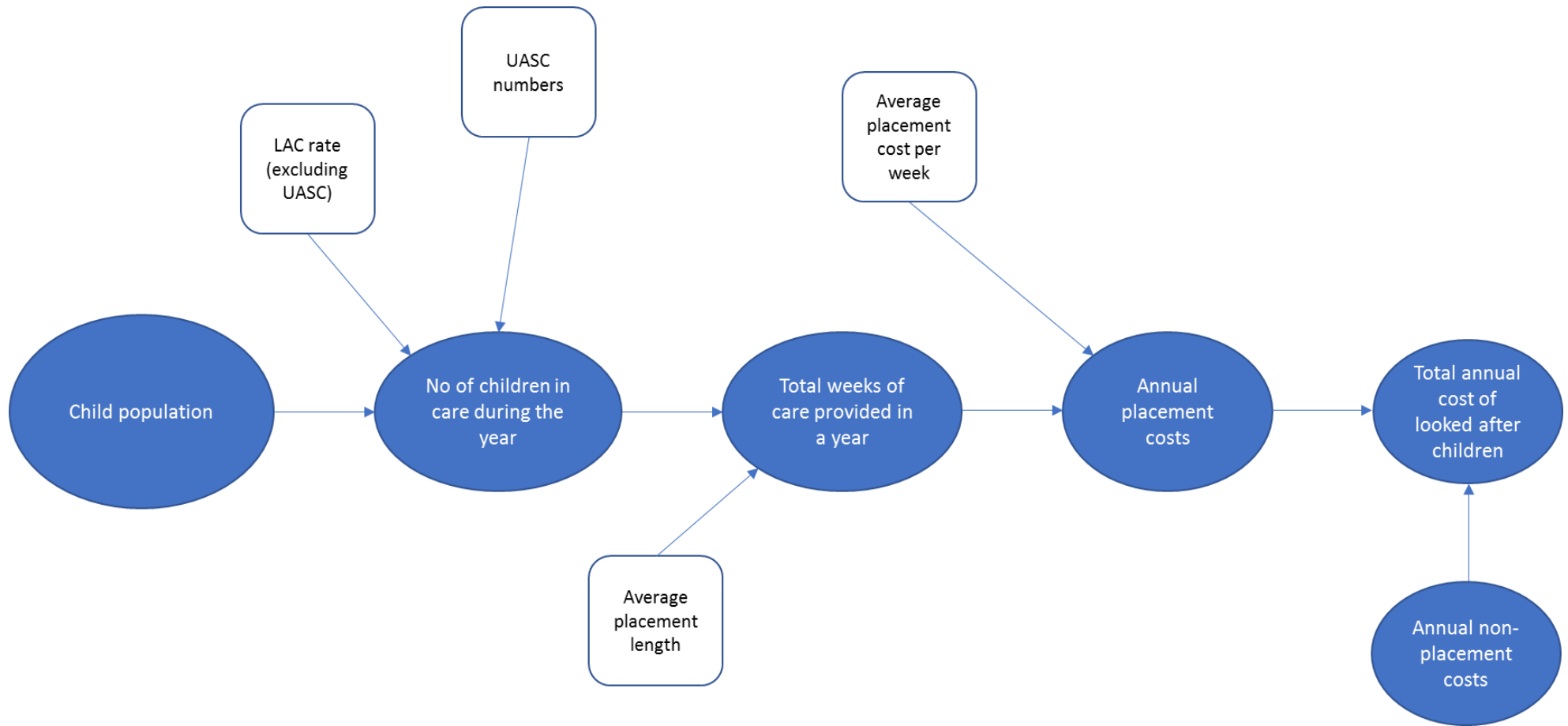


Figure 26. Thurrock children's social care demand and cost forecasting model 2017



Appendix 2. Literature review on what works in prevention and early intervention

Elozona Umeh, Senior Public Health Programme Manager
Annelies Willerton, Public Health Graduate Trainee

The literature supporting this review was searched using the Aubrey Keep Library Service. The search resulted in a range of articles which formed the major part of this review. Grey literature was also used to retrieve articles after an extensive search using the following sites;

- Early Intervention Foundation
- Research in Social Care Practice
- Community of Care Online
- Association of Directors of Children's Service

This section of this Annual Public Health report reviews what works in preventing children from accessing statutory children's care services as well as interventions that aid early identification and intervention. It is important to distinguish between prevention – stopping the problem happening in the first place; early intervention – getting in at the first signs of risk or trouble; treatment – responding once what has gone wrong has gone wrong. In Thurrock, there is a range of service to prevent risks, intervene early as well as respond to identified risky situations. A service mapping of the Thurrock Early Offer of Help Service was conducted. The below provides an insight to the current and formerly commissioned services within early help.

Service Mapping of Thurrock Early Help Services

A variety of evidence suggests early help or integration of services as part of ways to improve statutory response to families. There is an early help service known as the Early Offer of Help which is currently being delivered in Thurrock by a range of providers. A needs analysis was undertaken to identify the key factors present in Child in Need (CIN) and Child Protection (CP) cases and the services that were evidenced to have an impact in addressing these. In over half the cases childhood neglect was present and the underlying factors in many of these cases were substance misuse, poor parenting, domestic violence and sexual violence.

As a result the local authority in partnership with the Thurrock Clinical Commissioning Group (CCG) jointly funded and commissioned a range of services aimed at providing support at an earlier stage to reduce the risk of needs escalating and to improve outcomes for those most in need of support. In recognition of the impact on outcomes for children and financially for both organisations the following services were jointly commissioned in 2013 under the Early Offer of Help

- Domestic Abuse support services (a perpetrators program and a victim support program)
- Sexual Violence support service
- Substance Misuse support service
- Parenting program
- Family Intervention Program

However, in 2016 the CCG funding element was discontinued. An impact assessment and a Return on Investment (ROI) of the early help commissioned services was conducted. The exercise recommended that the CCG continue its £450,000 funding for Early Offer of Help as this will prevent excessive increased demand and future costs. As a result of this reduction in funding the Family Intervention Program and the Substance Misuse Programme were discontinued.

The table below attempts to map the services commissioned within the Early offer of Help banner, supported by outcomes achieved and evidence of effectiveness of these services is presented in the table below.

Service	Provider	Service Description	Outcome	Evidence of Effectiveness
Parenting Programmes Page 105	Coram	<p>Mellow Mums - Mellow Mums, part of the Mellow Parenting and family programmes, is an attachment and relationship based group intervention for mums who have babies and young children. This programme uses a combination of reflective and practical techniques that allow parents to address their personal challenges as well as the challenges they face with their children. Parents also reflect on their experience of being parented and how this affects their relations with their children. This is delivered over 14 weeks with both mum and baby/child with significant attachment issues. This programme now forms part of the Prevention and Support Service.</p>	<p>During the three years of delivery samples have been taken on two occasions to review the success rate of interventions at Social Care level. The sample size covered approximately 10% of the overall case load over the three year period.</p>	<p>Mellow Parenting evidence rating is 2 . Mellow Parenting has formative evidence of improving child and parent outcomes from a single study involving pre/post intervention comparisons of the mothers' behaviour. It has been effective in;</p> <ul style="list-style-type: none"> • Reduced likelihood of children remaining on the child protection register • Improving parenting skills (coded observation)
		<p>Strengthening Families Strengthening Communities - This service is an inclusive evidence-based parenting programme, designed to promote protective factors which are associated with good parenting and better outcomes for children. The service in Thurrock is a 12 week group parenting course that covers all aspects of effective parenting, boundary setting, praise and warmth and working with children's emotions. It uses peer support with distinct modules covered each week. It also includes face-face brief intervention with additional support for the family in their home. This programme now forms part of the Prevention and Support Service.</p>	<p>The outcomes of this programme were maintained one year on from the end of the programme.</p>	<p>The effectiveness of SFSC has been demonstrated by a variety of studies. A meta-analysis of 55 studies concluded that SFSC causes positive changes in the small to medium range for child behaviour problem, parent well-being and parenting skills; effect sizes increased with the intensity level of the programme with overall effect sizes (Cohen's d) ranging between 0.35 and 0.48 for between groups.</p>

		<p>Triple P - Triple P give parent's simple and practical strategies to help them build strong, healthy relationships to enable them confidently manage their children's behaviour and prevent problems developing. This is a 13 week programme which is utilised by parents with teenage children where there are particular behavioural patterns and seeks to avoid those escalating further in adolescence. It works over a 13 week programme. This programme now forms part of the Prevention and Support Service.</p>		<p>The evidence base for Triple P includes scientific papers that have contributed to the theory and development of essential procedures involved in forming part of the Triple P system of parenting interventions. This includes research related to the efficacy, effectiveness and dissemination of intervention programs, epidemiological studies, correlational studies, service-based research, and evaluation of professional training, large-scale population trials, and meta-analyses. It also includes observational studies of family interaction and independent program evaluations . Two large trials of Triple-P offered at all levels are among the few studies to have demonstrated impact of a universal and targeted approach combined. Barth suggests that the evidence-based Triple P approach offers a general framework that could be used to guide the future evolution of parenting programs</p>
Programme to Support Victims and Survivors	Changing Pathways	<p>Success Through Effective Parenting Support - – This programme offers an 8 week therapeutic and practical support 1-2-1 response covering service user-led group programme. The key focus of the STEPS programme is to raise awareness and decrease the impact on parenting of domestic abuse. The service in Thurrock is working to build a better understanding of all victims of domestic abuse, how this may have an impact on children and fast emotional recovery victims may need. In doing this, women who attend the programme gain support from both the facilitators and each other, and are empowered to address the issues affecting them and their children. As well as exploring the emotional impact of abuse on them and their children, the programme also provides an opportunity to develop/build on positive parenting after domestic</p>	430 women have accessed the 8 week 'STEPS' programme and 1360 sessions have been delivered for the drop-in service over the three year period that the contracts have currently run. The outcome of this programme indicated higher percentage of women understanding the impact of abuse and violence on their children and feeling safe.	

		abuse. This programme now forms part of the Prevention and Support Service.		
--	--	---	--	--

	<p>Essex Community Rehabilitation Company (previously DVIP)</p>	<p>Domestic Violence Perpetrators Programme – This programme in Thurrock is an intensive 26 week programme (2.5 hours per week) and only commissioned for 10 men each year. It aims to help this cohort, who have been abusive towards their families, partners or ex-partners, change their behaviour and improve in their relationships. In Thurrock, the service delivers an intensive challenge and support peer programme which seeks to understand perpetrators childhood experiences and how they formed the attitudes that led to abusive patterns of behaviour. One of the key focuses is to address these behaviours and attitudes through providing understanding of power and control and its impact on partners and children, and exploring these via the group facilitators and peer challenge. All referrals to this service have been within Social Care, generally with children on a Child Protection Plan and sometimes on a child in need plan. For this reason it was intentionally targeted at those cases which represented the highest risk to children. Family intervention helps vulnerable families who may be facing issues such as:</p> <ul style="list-style-type: none"> • poor physical and mental health; • domestic violence; • substance misuse; • a lack of basic and life skills; • Behavioural problems. <p>This programme now forms part of the Prevention and Support Service with a change of providers from January 2018</p>	<p>For the outcome of this programme, 93% of partners reported a cessation of abuse after completing the programme. Additional 93% of partners reported feeling safer where as 73% of partners reported the perpetrator had an improved relationship with children. Finally 83% of partners reported the changes had been sustained post intervention. This indicates a potential need to offer follow up support after closure to ensure that changes are sustained in the view of Social Care (this is not completely in line with the 83% of partners reporting sustained changes.</p>	<p>A cohort of men convicted and sentenced by the criminal courts was allocated to a DVPP programme. The impact of both types of sentence on women’s experiences of abuse and violence was measured and compared. The findings of the research included that there was a positive impact – men who had attended the DVPP recently were much less likely to continue abusive behaviour than men who had not (Dobash et al, 1999).</p>
--	---	--	---	--

Family Intervention Project (FIP)	Catch 22	<p>FIP - The Thurrock service delivered an intensive programme for families with multiple and complex issues including: substance misuse, crime and anti-social behaviour, domestic abuse and violence, teenage pregnancy, children not in school, no paid employment, housing issues, debt, inadequate parenting and others. Work is usually completed with a key worker allocated to a family working with them for between 9 and 18 months, with 12 months an average intervention time. The keyworker will seek to work in all areas, signposting where appropriate, and co-ordinate the family to ensure children are kept safe and remain in the family home. (This service has been decommissioned following reduction in funding from the CCG)</p>	<p>The programme has been effective and has received a positive outcome since it was implemented. For example 60% of parents gained employment after signing up to the programme, 23% completely moved off of benefits, 75% or more decrease in crime and anti-social behaviour whereas 59% of children has no school exclusions</p>	<p>An evaluation of family intervention projects (FIPs) has shown that this programme have reduced crime and antisocial behaviour. The research, commissioned by the government, found that the more time family intervention teams worked with families the greater the chance of a successful outcome. Overall they found that 79% of parents completing the courses showed improvements in mental well-being while three quarters of all parents reported reductions in either parenting laxness or over-reactivity. Serious conduct problems in their children dropped by a third from 59% to 40%.</p>
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 609 Substance Misuse P</p>		<p>Substance Misuse – This service was based on a hybrid service which encompasses elements from Changing Trax, Options 2 and Hidden harm programme. The service involves delivery of a two levels of support – early intervention and an intensive support for families affected by substance misuse and where children at significant risk of becoming looked after. (This service has been decommissioned following reduction in funding from the CCG)</p>		

Sexual Violence Support Programme	SERICC	<p>Sexual Violence Support Programme - The service in Thurrock provides support to:</p> <ul style="list-style-type: none"> - Women with children on the edge of care where sexual violence is or has significantly impacted on the welfare and wellbeing of the child / children. - Women whose children who are looked after, who have been referred as a result of a child protection conference where the intervention has been recommended before consideration is given to their children being returned.<i>(This programme forms part of the Prevention and Support Service).</i> 		
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 110</p> <p>Troubled Families Programme</p>	Thurrock Council (in-house provision)	<p>Troubled Families - This programme is a targeted intervention for families with multiple problems, including crime, anti-social behaviour, truancy, unemployment, mental health problems and domestic abuse. The programme identifies a 'troubled family' and assigns a key worker. <i>This programme forms part of the Prevention and Support Team.</i></p>	<p>Troubled Families programme has had two phases of programme deliver.</p> <p>Thurrock TF target numbers for Phase I was to recruit 360 families on the programme between 2012 –2015. Thurrock met this target. Phase e II which started in 2015 runs until 2020. Thurrock is required to work with 1240 families which is broken down below;</p> <ul style="list-style-type: none"> • Year 1 – 197 families were supported • Year 2 – 370 families were supported • Year 3 – 331 families were supported • Year 4 & 5 not yet known but will be broken up to cover the remaining 	<p>An evaluation of the programme was carried out in 2015 with a suite of evaluations at different stages . It is worth noting that funding from this service forms a huge part of the PASS service and is likely to be suspended after 2020. An implementation plan for post 2020 has been submitted to the DCLG for consideration. (Still waiting on Teresa Goulding for more information on outcomes etc</p>

			number to reach full target.	
<p>Page 4</p> <p>Multi-Agency Safeguarding Hub</p>	<p>Thurrock Council (in-house provision)</p>	<p>MASH was created to enhance information sharing across all organisations involved in safeguarding the welfare of children in Thurrock - encompassing statutory, non-statutory and third sector sources.</p>	<p>A summary of MASH outcomes;</p> <ul style="list-style-type: none"> • MASH enquiries have decreased since the previous year • Police and Schools are biggest enquiry groups • 2016/17 saw more cases rated as Red than the previous year (i.e. increased severity) • 2016/17 saw a large increase in proportion of cases that were past their due date (is this a sign of increased demand on the system?) • 2016/17 saw an increase in the proportion of enquiries for non-White British children, e.g. White Other and African groups. 	<p>A Report by the Home Office on Multi-Agency Safeguarding Hubs underpins the setup of this offer. Thurrock model has been acknowledged by Ofsted as working well.</p>

	<p>North East London Foundation Trust (NELFT)</p>	<p>This includes universal and targeted offer through Health Visiting and School Nursing programs for children aged 0 – 19 years.</p> <p>Health Visiting – This is a universal offer to children and families led by Health Visitors (HV) and supported by teams of mixed professionals with multiple skills. The service in Thurrock work across a number of stakeholders, settings and organisations to lead delivery of the Healthy Child Programme 0-5 (HCP), a prevention and early intervention public health programme that lies at the heart of the universal service for children and families and aims to support parents at this crucial stage of life, promote child development, improve child health outcomes and ensure that families at risk are identified at the earliest opportunity. The model of delivery is termed 4-5-6 model which comprises of 4 levels of delivery, five mandated contact points (it involves key contact points families are expected to be offered an encounter with a Health Visitor) and six high impact areas. Safeguarding children cuts across this model to ensure risks are identified and outcomes are improved.</p> <p>The School Health Service – the core offer for school nursing include health promotion and prevention by multi-agency group with. This is done across four levels with contacts with all school children’s at Key stage 1, 2 and 3. Health assessments are carried out and risks identified. This service also provides defined support for children with additional and complex health needs as well as needs identified through the Joint Strategic Needs Assessment (JSNA).</p> <p>The offer here also includes some offer for Young and</p>	<p>The Healthy Families Service is expected to contribute to the following overarching outcomes for children as well as contribute to the closing the gap in inequalities within Thurrock</p> <ul style="list-style-type: none"> • Children and Young People are ready for Education and Learning • Children and Young People are in Good Physical Health • Children and Young People are able to make Healthy Lifestyle Choices • Children, Young People and their Parents have Good Emotional Mental Health and Wellbeing • Children and Young People Live Safely • Improved Parental Aspirations and Achievements 	<p>This service is underpinned by the Healthy Child Programme Pregnancy - 5 years old is an evidence based policy that underpins the home visiting service. Evidence base for this policy has been recently updated - Rapid review to support evidence for the Healthy Child Programme 0 - 5 published in 2015. The Healthy Child Programme 5 – 19 underpins the School Health Service</p>
--	---	---	--	--

Vulnerable parents, healthy eating for infants and mothers including parenting programme to support positive parenting skills.

What Works for Early Intervention

Early help involves support provided ‘as soon as a problem emerges’⁷. The evidence reviewed on the effectiveness of early interventions to prevent abuse and neglect of children and young people was predominantly from outside the UK, and focused more on home visiting programmes and parenting programmes.

Home Visiting

Home visiting programmes at the ante-natal and early post-natal stage can be effective in facilitating the development of a sensitive and empathic relationship between the parent and young child which may forestall attachment and other relationship difficulties.

The NICE guidance on Child Neglect and Abuse (NG 76; 2017) suggests that home visiting programmes should be considered as a form of early help for families showing possible signs of abuse or neglect. This should be for a minimum duration of 6 months, for parents or carers at risk (or those with previously confirmed instances) of abusing or neglecting their children.

The recommendations required that home visiting programmes should include:

- support to develop positive parent-child relationships, including helping parents to understand children’s behaviour more positively, modelling positive parenting behaviours; observing and giving feedback on parent-child interactions
- Helping parents to develop problem-solving skills
- Support for parents with substance misuse and mental health difficulties
- Support for parents to access relevant services,

Although evidence around home visiting is well established, it is important to note that further research is still called for on effective components of a home visiting programme for preventing child abuse and neglect in the UK. The majority of the evidence base is from the US, with mixed findings of effectiveness as well as poor reporting of intervention details, making it difficult to ascertain the key components of a successful home visiting programme.

Two home visiting interventions have been conducted in the UK^{8 9}. In one of the studies, pregnant women receiving home visits were assessed as having a higher level of maternal sensitivity and infant cooperativeness compared to those receiving standard care, but no differences were identified in any other measures, possibly due to a lack of statistical power. There was also no difference in the outcome of being placed under child protection or into care – in fact, the intervention arm observed a slight increase in the number of cases of abuse, which the authors attributed to surveillance bias.

The other randomised controlled trial was conducted on a larger scale with a larger sample size of 1645 first-time teenage mothers in order to test the effectiveness of the US Family Nurse Partnership (FNP) programme as an intensive preventive home visiting service. Again potentially as a result of surveillance bias, those receiving the FNP intervention were significantly more likely to have a safeguarding event noted in GP records (AOR 1.85, 95% CI 1.02 to 2.85, p=0.005). Conversely, GP health records were used as opposed to data from children’s social care, and there were high levels of missing data in both intervention and control groups in relation to this outcome. No significant differences were found between groups in regards to parent-reported abuse and neglect or

⁷ Working Together to Safeguard Children, 2013

⁸ Barlow J, Davis H, McIntosh E, Jarret P, Mockford C, Stewart-Brown S (2007) The role of home visiting in improving parenting and health in families at risk of abuse and neglect: Results of a multicentre randomised controlled trial and economic evaluation. Arch Dis Child 92: 229-33.

⁹ Robling M, Bekkers M-J, Bell K et al. (2015) Effectiveness of a nurse-led intensive home-visitation programme for first-time teenage mothers (Building Blocks): a pragmatic randomised controlled trial. The Lancet 387 (10014): 146-55.

maternal-child interaction outcomes. The authors suggested that benefit for child development outcomes would largely arise in children after the age of 2 years and called for a longer-term follow up to accurately determine the effectiveness of a home visiting intervention on these outcomes.

In the UK, an RCT¹⁰ of the Family Nurse Partnership programme, on the one hand found the programme to be successful in engaging with disadvantaged families and reaching vulnerable groups of young mothers. On the other hand, measures of effectiveness found no significant impact on neither the primary outcomes measure nor outcomes by key sub-groups (age, NEET, problems with basic life skills, area deprivation) or by variation in programme implementation. A wide range of secondary outcomes assessed also did not show significant benefits for this programme. As a result, Thurrock Council decommissioned this service and re-designed an offer for families to include a wider age range and population groups.

Other evidence based home visiting offer include; The Healthy Child Programme (HCP) which is the key universal public health offer for improving the health and wellbeing of children through health and development reviews, health promotion, parenting support, promoting screening and immunisations. A rapid review of evidence to update the Healthy Child Programme 0 – 5 in 2015 aimed synthesise relevant systematic review about ‘what works’ in key areas: such as parental mental health; smoking, alcohol/drug misuse; intimate partner violence; preparation and support for childbirth and the transition to parenthood; attachment; parenting support; unintentional injury in the home; safety from abuse and neglect. Evidence from the rapid review supported the design of the Thurrock Healthy Families Service.

Parenting Programmes

A range of parenting programmes have been documented to effectively support parenting in building positive parenting skills and sensitively required to improve children’s wellbeing. The Parenting Early Intervention Programme provided government funding to all England local authorities from 2008-2011 to test the effectiveness of several parenting programmes that have previously demonstrated trial efficacy in improving parenting skills and resultant improvements in children’s behavioural difficulties¹¹. The process tested four parenting programmes (Triple P, Incredible Years, Strengthening Families Programme 10-14 and Strengthening Families, Strengthening Communities) and found all four were effective in improving outcomes for parents and children (in improving parenting skills, parent well-being and reducing children’s behaviour difficulties) across the range of demographic backgrounds, including SEN). Improvement in these areas was maintained one year on. However, outcomes in relation to risk of abuse or neglect were not measured. In Thurrock, Triple P and Strengthening Families Strengthening Communities are currently being commissioned within the Prevention and Support Service as part of earlyt intervention to prevent children accessing statutory services.

An Australian study¹² found that participants in 2 variants of the Triple-P Parenting Program did show significant improvements across all measured indicators of risk potential for abuse and neglect, which were also sustained at the 6-month follow up. This study targeted parents who were experiencing anger management problems in relation to their child. The enhanced programme version contained additional content targeted at risk factors for abuse and neglect, and participating parents showed a significantly greater reduction compared to the standard programme in child abuse potential (measured via Child Abuse Potential Inventory scores, and unrealistic expectations scores, as measured by the Parent Opinion Questionnaire).

¹⁰ Robling, M et al, 2015, **Effectiveness of a nurse-led intensive home-visitation programme for first-time teenage mothers (Building Blocks): A pragmatic randomised controlled trial**, The Lancet , Volume 387 , Issue 10014 , 146 - 155

¹¹ Lindsay G, Strand S, Cullen MA et al. (2011) Parenting Early Intervention Programme Evaluation. Department for Education

¹² Sanders MR, Pidgeon AM, Gravestock F et al. (2004) Does parental attributional retraining and anger management enhance the effects of the Triple P-Positive Parenting Program with parents at risk of child maltreatment? Behavior Therapy 35: 513-35

Whalley and colleagues¹³ conducted a mixed-methods evaluation of Pathways Triple P, an NSPCC service tailored specifically to families where there are specific concerns about child neglect. This intervention was specifically delivered in the home on an individual basis for parents of children aged between 2 and 12 years old, who were not yet at the threshold for child protection interventions. Parents reported a reduction in severe emotional and behavioural child difficulties following the programme in addition to severe parenting difficulties. Improvements were noted in understanding of child's needs, parenting capability, parental commitment to child, greater parental sensitivity and helping to meet child's developmental needs. These outcomes were described in greater detail in the semi-structured interviews, where the relationship with the programme practitioner was described as the key facilitator to these outcomes (in particular the practitioner's communication style, approach, experience, flexibility and supportive encouragement).

It is important to note that, despite not being on a Child Protection Plan, children on entry to the programme were reported as still having very high levels of need, and almost half of the children still had clinical levels of need by the end of the programme, indicating that that further support may be required. A similar conclusion that parenting intervention may be ineffective or insufficient in cases of high need and families with complex, multi-layered problems has been reached during a recent literature review¹⁴ as well as earlier evidence reviews¹⁵¹⁶

Children in Need and Children in Protection Plans – Supportive Interventions

A child should be taken to be in need if:

- He/she is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for him/her of services by a local authority;
 - His/her health or development is likely to be significantly impaired, or further impaired without the provision for him/her of such services;
 - He/she is disabled.
- (Section 17(10), Children Act 1989)

Some parenting programmes have been found to be effective in preventing children from being taken into care. Effective programmes and interventions with children and families at the edge of care (this stage describes various stages before or as a child becomes looked after).

Two systematic reviews have identified interventions aimed at improving parent sensitivity and secure child attachment which have shown to be effective in children under the age of five (NICE 2015; Barlow 2016). Video feedback programmes and parent-child psychotherapy in particular have been recommended for parents of preschool-age children on the edge of care with, or at risk of, attachment difficulties. NICE (2015)¹⁷ recommends an alternative such as parental sensitivity and behaviour training for parent unwilling to take part in video feedback programmes. This should

¹³ Whalley P (2015) *Child neglect and Pathways Triple P: an evaluation of an NSPCC service offered to parents where initial concerns of neglect have been noted*. London: NSPCC.

¹⁴ Schrader-McMillan A and Barlow J (2017) *Improving the effectiveness of the child protection system - A review of the literature*. University of Oxford.

• ¹⁵ Barlow J, Johnston I, Kendrick D, Polnay L, Stewart-Brown S (2006) *Individual and group-based parenting programmes for the treatment of physical child abuse and neglect*. *Cochrane Database of Systematic Reviews* (3) CD005463. DOI: 10.1002/14651858.CD005463.pub2.

¹⁶ Ward H, Brown R and Hyde-Dryden G (2014) *Assessing Parental Capacity to Change when Children are on the Edge of Care: An Overview of Current Research Evidence*. London: Department for Education

¹⁷ NICE Guidinace, *Child Abuse and Neglect, NG 2017*; <https://www.nice.org.uk/guidance/ng76>

consist of a parent-only session followed by 5-15 weekly or fortnightly parent-child sessions over a 6-month period, to include the following:

- Coaching the parents in behavioural management (for children 18 months- 5 years) and limit setting
- Reinforcing sensitive responsiveness
- Ways to improve parenting quality
- Homework to practise applying new skills

NICE also recommend a multi-agency review for parents who decline the above interventions or made little improvement before going ahead with further interventions.

A recent review by Schrader-McMillan and Barlow (2017)¹⁸ has warned however that the evidence for the above interventions in cases of identified child maltreatment is generally based on limited research of low quality.

Interventions to support Physical abuse

Parent-child interaction therapy - Parent-child interaction therapy (PCIT) is an individualised intervention developed for parents and children aged 3-7 years with externalising behavioural problems. It aims to improve the quality of the parent-child relationship by helping parents to understand how their behaviour affects their child and by teaching behaviour management strategies that focus on positive reinforcement rather than power assertion.

While there is no evidence of its application in the UK, there is evidence of its effectiveness among Australian families at a high risk of, or already engaged in, maltreatment¹⁹. However, the difficulties in assessing the effectiveness of such interventions with families where a child has been physically abused should be acknowledged. The measured effect of the intervention could be imprecise as a result of a reliance on parent self-reporting and measuring risk factors associated with abuse such as parental behaviour and attitudes, as opposed to direct, objective measures of physical maltreatment.

The majority of the supporting evidence has relied on risk factors associated with child maltreatment as primary outcomes. Despite this, an earlier US RCT did show an intervention effect on abuse recurrence rates - after a 2 year follow-up, considerably fewer parents receiving PCIT had a re-report for physical abuse (19%) compared to those who received standard care (49%).

Multi-systemic therapy - Multi-systemic therapy (MST) is a family and community-based treatment programme originally designed for young offenders or young people aged 11-17 at risk of care who are demonstrating anti-social behaviours²⁰.

The intervention has recently been adapted specifically for families where there is evidence of child abuse and/or neglect (MST-CAN) as an intensive, multi-faceted intervention to address the multi-determined nature of child physical abuse. It has been evaluated in a US randomized effectiveness

¹⁸ Schrader-McMillan, A., & Barlow, J. (2017). Improving the effectiveness of the child protection system - A review of the literature. Oxford: University of Oxford.

¹⁹ Thomas, R., & Zimmer-Gembeck, M. J. (2012). Parent-child interaction therapy: An evidence-based treatment for child maltreatment. SAGE. <http://dx.doi.org/10.1177/1077559512459555>

²⁰ <http://www.mstuk.org/>

trial, where 86 families followed by Child Protective Services due to physical abuse were randomly assigned to receive MST-CAN or Enhanced Outpatient Treatment (EOT), which was the standard service normally offered with enhanced engagement and parent training.

Intention-to-treat analyses showed 16 months after programme entry, MST-CAN was significantly more effective than EOT improving risk factors closely associated with maltreatment from both youth and parent perspectives, and led to fewer out-of-home placements (14 versus 30%). Perhaps surprisingly, there were no significant differences between the groups regarding maltreatment outcomes (the youth experiencing another abuse was 4.5% in MST-CAN group compared to 11.9% in the EOT group). MST-CAN is now being piloted in several sites in the UK; however an evaluation is yet to be undertaken or published. Despite this, it is an intervention that will be recommending in the upcoming (currently out for consultation) NICE 2017 guidance on Child Abuse and Neglect for parents with children aged 10-17 if the parent has abused or neglected their child. It should involve the whole family and include a 24/7 on-call support service to help families to manage crises.

Gaps in the evidence

The draft NICE (2017) guidance on Child Neglect and Abuse recommends effective interventions to address abuse and neglect of children and young people. The guidance also states that the majority of evidence used to make recommendations was from outside the UK, as many UK interventions or approaches have not yet been evaluated using high-quality research designs hence posing a gap in evidence for effective interventions within the UK. The guidance also calls for more evidence to assess the potential effectiveness and cost-effectiveness of home visiting in higher risk families where abuse or neglect is occurring or has occurred. Home visiting is a tool often used for monitoring families as part of a Child Protection Plan, but little is known about what practices within this setting help families to change and address problematic behaviours.

Interventions to support child sexual abuse

Evidence suggest that plans for children who have been sexually abused need to take account of the overall needs of the child rather than focusing on the sexual abuse alone, and need to consider a variety treatment approaches to suit the individual needs. The draft NICE (2017) guidelines specifically emphasise, for girls aged between 6 and 14 who have been sexually abused and are showing symptoms of emotional or behavioural disturbance, professionals should discuss with the individual as to whether individual focused psychoanalytic therapy or group psychotherapeutic and psycho-educational sessions would suit her best.

Cognitive behavioural therapy - Cognitive behavioural therapy (CBT) currently has the strongest evidence base for benefitting sexually abused children. A systematic review by Macdonald et al²¹ assessed the efficacy of cognitive-behavioural approaches in addressing the immediate and longer-term adverse consequences of sexual abuse in children and young people. Across the ten included trials, results suggested that trauma-focussed CBT may have a positive impact on outcomes including depression, post-traumatic stress disorder, anxiety and child behaviour problems, but most results were not statistically significant. However, half of the studies included asymptomatic children which

²¹ Macdonald ,G, et al. (2012) Cognitive-behavioural interventions for children who have been sexually abused. *Cochrane Database Systematic Reviews* Issue 16:5.

may limit the ability to detect an intervention effect, as it is difficult to observe improvement in better-functioning individuals. The validity or applicability should still be questioned due to the generally poor reporting by the studies which were predominantly conducted in the US.

Letting the Future in - A psychodynamic, attachment-based therapeutic approach called 'Letting the Future In' is an example programme developed by the NSPCC and due to be recommended by NICE (2017), stating that such a programme should:

- emphasise the importance of the therapeutic relationship between the child and therapist
- offer support tailored to the child's needs, drawing on a range of approaches including counselling, socio-educative and creative approaches (such as drama or art)
- include individual work with the child (up to 20 sessions, extending to 30 as needed)
- involve parallel work with non-abusing parents or carers (up to 8 sessions)

The evaluation for this intervention²² included qualitative case studies and the largest ever RCT of a therapeutic intervention for child sexual abuse, with 242 children aged 6-16 years. Children were randomised to either an immediate intervention group or six-month waiting list group.

The proportion of children with clinical levels of symptoms or significant difficulties between assessment on referral, and 6 month follow up reduced significantly from 73% to 46% in the intervention group, while there was no significant reduction in the control group. It is important to note this was only for older children (over 8 years) and young people. No change was observed in the younger children (33% of the participants) who were unable to complete the self-report measures, emphasising the importance of considering the child's age and developmental stage when choosing an intervention.

Interventions to support Substance abuse

Along with domestic abuse and mental health problems parental substance misuse features in a large number of cases open to children's social care. It is clear that parental substance misuse can have an impact on child health and development from birth through to when they are adults. The potential for parenting capacity to be undermined and children's health and development harmed by parental substance misuse is considerable, particularly when other risk factors such as domestic abuse and mental health difficulties are present (Cleaver et al, 2011; Horgan, 2011; Barnard, 1999)^{23,24}. There is a serious risk that parents will neglect their children in these circumstances hence evidence suggested intervention below;

Parents Under Pressure - Child maltreatment tends to occur as a result of a complex interplay between drug use, maternal psychopathology, parenting practices, family environment and socioeconomic factors such as unemployment and poverty, as opposed to parental drug use specifically as a single risk factor. In recognition of this, an intensive, home based intervention named 'Parents Under Pressure' (PUP) was developed by Australian researchers to address multiple domains of family functioning including parental psychopathology, child behaviour problems, parent-child relationship difficulties, and social-contextual factors²⁵. The programme was designed

²² Carpenter J, Jessiman T, Patsios D et al. (2016) Letting the Future In: a therapeutic intervention for children affected by sexual abuse and their carers – an evaluation of impact and implementation. <https://www.basw.co.uk/resource/?id=5045>

²³ Cleaver, H; Unell, I and Aldgate, J (2011), *Children's needs, parenting capacity: The impact of parental mental illness, learning disability, problem alcohol and drug use and domestic violence on children's safety and development* (2nd edition), Department for Education

²⁴ Horgan, J (2011) *Parental substance misuse: Addressing its impact on children*

National Advisory Committee on Drugs

²⁵ Dawe, S. and Harnett, P. H. (2007) 'Improving family functioning in methadone maintained families:

for high risk families where a parent is receiving methadone maintenance treatment. The Australian randomised-controlled trial compared the 20-week intervention to both a 'usual care' group and another receiving a 'brief intervention' (two-session parenting education) service. Only parents who participated in the PUP intervention showed a significant decrease in child abuse potential (measured by the child abuse potential inventory), harsh parenting and parenting stress.

Despite this, 36% of the PUP group showed continued high-risk status over the course of the study, suggesting that not all parents are responsive to intervention and highlighting the need to examine each individual family's response (change in parenting capacity) to a parenting intervention.

The programme is currently being evaluated in a UK-based randomised controlled trial for families with a child under two and a half years old by the NSPCC and University of Warwick in regards to its effectiveness, cost-effectiveness and acceptability to service users.

Interventions to support domestic abuse

Children can suffer serious long term problems as a result of domestic abuse even if they themselves have not been directly harmed or abused. According to NICE guidance support should be provided for both the non-abusing parent and child²⁶. Services should be tailored to the level of risk and specific needs of people experiencing domestic violence or abuse.

Support for the non-abusing parent

There is moderate evidence to support the following forms of support:

- Advocacy services (to inform, guide and help victims access a range of services and supports)
- Skill building (teaching, training, experiential or group learning)
- Counselling interventions (based on brief educational, cognitive behavioural and motivational interviewing approaches) to improve a range of outcomes - PTSD symptoms, depression, anxiety, self-esteem, stress management, independence, support, re-occurrence of violence, birth outcomes for pregnant women, motivational level and/or readiness to change.
- Intensive therapeutic interventions such as group therapy may also be effective for many of the above outcomes in some cases may reduce likelihood of future IPV or re-abuse

The majority or all of the studies included in the evidence review conducted for the guidance²⁷ reported improvements in a number of the outcomes above that were measured.

Support for the child

The above review indicates the evidence is currently stronger for single component therapeutic interventions that are aimed at both mother and child, compared to child only. Intervention approaches include:

results from a randomised controlled trial.' *Journal of Substance Abuse Treatment* 32, 381-390.

²⁶ NICE (2014) PH50: Domestic violence and abuse: multi-agency working

²⁷ <https://www.nice.org.uk/guidance/ph50/resources/review-of-interventions-to-identify-prevent-reduce-and-respond-to-domestic-violence2>

- mother-child psychotherapy
- shelter-based parenting intervention combined with play sessions for children
- parent-child interaction therapy (including mother-child play, teaching of praise and discipline techniques)
- experiential, activity-based and interactive therapy intervention.

Outcomes that potentially improve as a result include child behaviour, mother-child attachment and stress and trauma-related symptoms in mothers and children.

Psycho-educational interventions (addressing skills such as: stress and conflict management, coping and relationship skills, understandings of violence, etc.) may also be effective in improving children's coping skills, behaviour, emotional regulation, conflict resolution skills and knowledge about violence, but the evidence is weakened by methodological weaknesses, such as small sample sizes, lack of detail on intervention.

There is also moderate evidence (i.e. most studies contain some methodological weaknesses) of effectiveness of multi-component interventions that:

- focus on advocacy, such as community-based service planning, nurse case management, and non-parental childcare for disadvantaged families, helping to reduce trauma symptoms and stress, and improving child behaviours such as aggression)
- include both therapy and advocacy
- focus on therapy and parenting

The review acknowledged that there is still a lack of evidence for general population interventions for children, and for community based educational interventions that offer more broad prevention.

Other Interventions

Short stay residential care for adolescents on the edge of care - An evidence scope conducted by Dixon et al²⁸ found support for a restructuring of the care system where short-stay residential care is an option within a continuum of child and family support, rather than simply a last resort. The authors suggested this option could be effective in preventing full entry into care by offering respite and improving young people's relationships with their families. It also suggests where care is considered to still be the most appropriate option, allow the opportunity for a more planned and smoother transition to care, which may in turn promote future reunification.

The combination of direct work with young people and support for their families may better meet the needs of some older adolescents and those with more challenging behaviours.

Functional Family Therapy - Along with Multi-Systemic Therapy, Functional Family Therapy (FFT) is an intensive family-focused intervention originating from the US that is previously government funded in the UK. It targets young people aged 10-18 years who are still living at home but have persistent behavioural and/or substance misuse problems. It includes a focus on and assessment of those risks and protective factors that impact on children and young peoples as well as their environment. The weekly sessions over a 3-4 month period aim to reduce disruptive communication patterns and encourage positive interactions among the family.

²⁸ Dixon, J. et al. (2015) *Supporting Adolescents on the Edge of Care: The role of short term stays in residential care*. London: Action for Children

An FFT pilot started in Brighton in 2007 and with the first UK randomised controlled trial is being conducted by Kings College in partnership with Brighton and Hove Youth Offending Services. Other randomised controlled trials have equally started in parts of the UK for e.g. in Croydon Council in partnership with Queen's University, Belfast.

Integrated or multi-dimensional programmes - The need to offer a more integrated package of support in order to better meet the complex needs of children and their families has recently been acknowledged (Ward 2014).

With funding from the Department for Education (DfE) Innovation Programme, a project called 'Step Change' was created by Action for Children to bring together Multi-systemic Therapy (MST), Functional Family Therapy (FFT) and Treatment Foster Care Oregon (TFCO) within 1 overall programme, operating across 3 London boroughs with a single referral pathway to provide adolescents and families with access to the most appropriate intervention from the three on offer. However, TFCO was removed early due to concerns about the involved costs and resources as well as the lack of evidence of its effectiveness in the UK. The evaluation found some improvement in follow-up measures (risk taking behaviours including offending; increasing engagement in education, employment and training; improving relationships between young people and families to avoid family breakdown; reduction in need for care or custody), although these were not completed in sufficient numbers to provide a reliable analysis²⁹.

Factors that appeared to improve outcomes emerged from the qualitative data with families and workers, including the consistency, frequency and accessibility of the therapy, the meaningful relationship formed with therapists and their perceived impartiality. While the project showed some initial signs of success, the organisations involved decided to close the project after the DfE funding finished, but did recommend that setting up joint commissioning arrangements (between health and social care) would help to maximise the chances of sustainable implementation.

In summary, the evidence base for effective interventions in the UK is generally lacking in robustness but innovative interventions are currently being piloted and evaluated, with findings to be published in the near future. As emphasised by NICE (2017), it is important to take the age and developmental stage of the child into account when selecting an intervention. Furthermore, it should be recognised that even if an intervention is noted as effective by the literature or guidance, it may not suit a particular person, family, and therefore where possible it is encouraged to give children, young people and families a choice of proposed interventions.

Reunification

Foster care is an intervention for children and young people experiencing abuse and or neglect in their home environment. The most common outcome for children leaving care is returning home to their parents or relative. However, evidence suggest that about half of children who come into care because of abuse or neglect suffer further abuse children if they return home, with up to half of those returning into care as a result. Gypen et al.'s (2017) systematic review reviewed 32 studies looking at multiple outcomes with the finding that outcomes were poor for these children across education, employment, housing, health, substance abuse and criminal involvement compared to their peers from the general population. Having a steady home base and getting a foothold in

²⁹ Blower S, Dixon J, Ellison S et al. (2017) Step Change: an evaluation. Department for Education. https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/585194/Step_Change_an_evaluation.pdf

education is shown to be important in outcomes for children growing up in foster care. Having a steady mentor who gives support when needed is a protecting factor³⁰.

A briefing published by the NSPCC 'Returning children home from care: learning from case reviews' identified a number of ways to improve practice for reunification, which are reflected in current legislation and guidance³¹ to include the following:

- Thorough assessments
- Clear conditions for return of child
- Preparation for and staged return of the child
- Sharing information and working with professionals in other agencies
- Good monitoring of the child before, during and after the return

Thorough Assessments

A thorough and careful assessment is needed to inform the decision as to whether Looked After Children should return to their family. In a follow-up of 3,872 children looked after by seven local authorities, Wade et al³² observed that well planned reunifications were associated with more stable reunifications, in particular those which were based on evidence of sustained change in parenting capacity and included provision of support services. Farmer et al³³ also noted greater stability for children returning home as a result of a more thorough assessment, but that 43% of children still returned home without a thorough assessment.

A recent review of the evidence on reunification³⁴ concluded that an assessment and care plan for reunification should include the following information:

- The types and number of family stressors/difficulties
- An agreement with parents about what needs to change before the child can return home i.e. the problems that led to care and require addressing
- A set of clear targets for parents to meet which are centred on what needs to change prior to reunification and over what timescales, including the consequences if these conditions are not met/risks are not removed
- Interventions and services to address known issues
- Contingency plans i.e. an alternative care placement if return home from care/accommodation is not possible
- Extent of family engagement, in particular compliance with conditions set out in the plan
- Family readiness/parental motivation (e.g. are the parents ambivalent about their child returning home)
- Reason for return home from care/accommodation
- When reunification should commence
- Preparation for reunification and support prior to return home from care
- Support and services post reunification
- Processes for monitoring and reviews following reunification

³⁰ Gypen, L., Vanderfaellie, J., De Maeyar, S., Belenger, L. and Van Hoken, F. (2017) Outcomes of children who grew up in foster care: Systematic-review. **Children and Youth Services Review**, Vol 76, May 2017, 74-83.

³¹ NSPCC Information Service, October 2015, Returning Home from care – Learning from case reviews.

³² Wade J, Biehal N, Farrelly N and Sinclair I (2010) Research Brief: Maltreated Children in the Looked After System: A Comparison of Outcomes For Those Who Go Home and Those Who Do Not. London: DCFS/DoH.

³³ Farmer, E., et al (2011) Achieving Successful Returns from Care: What Makes Reunification Work?, London, BAAF.

³⁴ Hyde-Dryden G, Gibb J, Lea J et al. (2015) Research report: Improving practice in respect of children who return home from care. National Children's Bureau

It is recommended that reunification plans for children in Thurrock consider the above assessment guide.

Gradual timing of reunification

Studies have found that a gradual, staged return home can increase chances of reunification and lead to a more durable home placement, as it allows time for well managed planning and proper consultation³⁵.

A review by Thoburn et al³⁶ found that reunification is less likely to be successful if the child returns after a short stay in care (less than 3-6 months), suggesting that a short timeframe may not allow sufficient change in the family environment or behaviour to take place. Equally, reunification is less likely to be successful after a prolonged period in care (over 2-3 years) where the child may have settled into a long-term permanent placement, experienced repeated placement disruption, or had minimal contact with their birth parents, impacting on their emotional and behavioural development which may be difficult for the birth parents to manage.

Caseworker engagement and family involvement

A longitudinal analysis of long-term foster care in the US found that relatively strong caseworker engagement with the family increased the likelihood of reunification³⁷. This suggests that family reunification may be helped by promoting parents' active, positive engagement in the child welfare process.

Research conducted in the UK also concurs that a plan for reunification should also be inclusive of the views of the involved children and families (Hyde-Dryden et al., 2015). Wade et al. (2010) found this factor to be associated with a reunification continuing at six months.

The NSPCC Reunification Practice Framework was developed, implemented and evaluated as a result of collaborative working between the NSPCC, 14 local authorities and the Universities of Loughborough and Bristol, with the ultimate aim of improving outcomes for children in relation to return home from care. It is based on both a detailed literature review of the evidence reunification as well as the experiences of local authorities, and is designed to support practitioners and managers to apply professional judgement to the decision of reunification and how to ensure its success.

In agreement with the research by Biehal et al (2015) returning home will not provide the best outcome in all cases and therefore the Framework recommends that robust assessments of risk of abuse and neglect are necessary to decide whether or not reunification would be the best option based on parental capacity to change among other factors. Most importantly, the child's own interests should be at the centre of all decision-making. Furthermore, as already mentioned, ongoing support, monitoring and review is needed for children and young people who do return home.

An evaluation of the introduction of the Practice Framework in 3 local authorities was conducted by the University of Bristol³⁸. Questionnaires and interviews were conducted with practitioners and managers before and after the introduction of the Framework. Prior to its implementation,

³⁵ Biehal N, Sinclair I and Wade J (2015) Reunifying abused or neglected children: Decision-making and outcomes. *Child Abuse & Neglect*, 49, pp.107-118.

³⁶ Thoburn J, Robinson J and Anderson B (2012) SCIE Research Briefing 42: Returning children home from public care.

³⁷ Cheng, T.C. (2010) 'Factors associated with reunification: a longitudinal analysis of long-term foster care', *Children and Youth Services Review*, vol 32, no 10, pp 1311–1316

³⁸ Farmer E and Patsios D (2016) Evaluation Report on Implementing the Reunification Practice Framework.

<https://www.nspcc.org.uk/globalassets/documents/evaluation-of-services/implementing-reunification-practice-framework-evaluation-report.pdf>

managers expressed awareness of issues in current reunification practice in their authorities, such as lack of timely assessments, inconsistent practice, lack of access to services and lack of data on outcomes. Practitioners reported that they found the Framework to be useful for all key tasks involved in reunification, and more practitioners felt more confident in conducting an assessment of a parent's capacity to change as a result of the Framework use. There was also an increase in the proportion of managers who established and used data to improve reunification practice to monitor returns home.

What works in promoting good outcomes for LAC and YP?

Good care planning and case management/tracking is fundamental to improved outcomes – this includes regular contact for the child or young person with a trusted key worker (usually a social worker) and effective co-working with other key professionals and carers. Recent research highlights the ongoing need for better quality decision making by social workers, and champions a blurring of the lines between the care system and community-based care to ensure that YP in particular can return home after brief spells in care (via adolescent support teams or other services such as treatment foster care)

Matching services to the underlying needs or problems, which may include mental health, housing, family counselling or substance abuse, have consistently been proven to improve family reunification in US studies³⁹.

A UK literature review has emphasised that support from services needs to commence as soon as possible, and should be proactive rather than reactive (Hyde-Dryden et al 2015). Concern has previously been expressed that supporting services tend to be of a short duration; in order for reunification to be successful, interventions need to be delivered for a sufficient duration in order to bring about sustained changes in behaviour/the family situation.

Currently, UK research is limited in regards to the types of interventions or services that work well to support families to enable children to return home from care, but there are ongoing studies being conducted. Below is a discussion of what already exists in the literature.

Effective substance misuse support services may help children to return home from care more quickly than those receiving usual services. An evaluation of the Family Drug and Alcohol Court (FDAC) pilot found that families who experienced the court-based family intervention had higher rates of cessation of parental substance misuse and consequently were more likely to be reunited with their children in comparison to families who received the usual care proceedings (35% vs 19%). Most importantly, neglect and abuse in the year following reunification was significantly lower than the comparison group⁴⁰.

Substance-involved parents also tend to exhibit negative parenting practices and therefore evidence-based parenting interventions are likely to be an important additional service to improve chances of reunification⁴¹.

³⁹ Choi, S. and Ryan, J.P. (2007) 'Co-occurring problems for substance abusing mothers in child welfare: matching services to improve family reunification', *Children and Youth Services Review*, vol 29, no 11, pp 1395–1410.

⁴⁰ Harwin J, Alrouh B, Ryan M, Tunnard J (2014) Changing Lifestyles, Keeping Children Safe: an evaluation of the first Family Drug and Alcohol Court (FDAC) in care proceedings

⁴¹ D'Andrade, A and Nguyen, H (2014) The relationship between parents' use of specific services, treatment problems, and reunification with children placed in foster care. *Journal of Public Child Welfare* 8(1).

The Strengthening Families Program (SFP) for substance-abusing families was created in the US to focus on three targeted areas: parenting skills training, child skills training, and family bonding/attachment with the aim of preventing child maltreatment. Interestingly, the analysis found that programme participation led to higher rates of reunification compared to matched families who did not receive the intervention, despite recovery from addiction not being the focus or requirement for programme participation⁴². This evidence suggests that for some families, parenting interventions which improve parental capacity may be sufficient to promote reunification.

The consensus from evidence reviews is that the programmes are more likely to be effective if they are intensive and multi-faceted, tailored to meet the needs of each member of the family (Ward et al. 2014).

Parent mentoring

Findings from a recent preliminary US study have suggested that a parent mentor programme may help to increase the likelihood of reunification⁴³. 98 parents involved in the US child welfare system were invited to participate in 'Parents in Partnership' (PIP), where parents who have successfully navigated the system provide support, information and mentorship to parents whose children are still in care. Of the 73 parents where reunification outcomes were measured, parents who attended the PIP orientation were 5.6 times more likely to be reunified. It is important to note no further data were regarded regarding programme participation, and the orientation attendance reflects the minimal level of involvement in the PIP programme. It is difficult to attribute the higher reunification rate solely to the intervention, as parents who are more motivated to reunify with their children may therefore have been more motivated to attend the PIP programme.

While the findings are in agreement with other US studies that have found promise for parent mentoring in the reunification process (Berrick 2011; Leake 2012), randomised controlled trials and larger sample sizes are needed in future research to determine effectiveness, and the application in a UK context would be welcomed.

Child emotional and behavioural support

As a result of abuse or neglect, Looked After Children and young people may exhibit difficult behaviours. Support from emotional well-being services such as CAMHS or its local equivalent should therefore be offered to address the underlying emotional wellbeing and/or mental health issues, and should continue for as long as needed after the child returns home (NSPCC).

A research briefing from the Social Care Institute for Excellence suggested that while it is not clear if emotional and behavioural support services are associated with reunification, they may be helpful in preventing reentry into care (Thoburn et al. 2012).

Ongoing monitoring and support post-reunification

Statutory guidance is clear that a child should continue to be supported and will often be treated as a child in need or under a Child Protection Plan once they return home. However, evidence reviews have found that interventions tend to end abruptly with no arrangements for long-term support or

⁴² Brook J, McDonald TP and Yan Y (2012) An analysis of the impact of the Strengthening Families Program on family reunification in child welfare. *Children and Youth Services Review*, 34(4), pp.691-695.

⁴³ Enano, S., Freisthler, B., Perez-Johnson, D., & Lovato-Hermann, K. Evaluating Parents in Partnership: A preliminary study of a child welfare intervention designed to increase rates of reunification. Accepted for publication September 2016, *Journal of Social Service Research*. doi: 10.1080/01488376.2016.1253634

monitoring of children's circumstances (Hyde-Dryden 2015). Ongoing assessment of the family's needs is necessary as the full extent of many difficulties may not become apparent until sometime into the return home⁴⁴.

In a prospective study with a two-year follow-up of 180 children returned to their parent(s) in six local authorities in England, involvement of another agency or professional in monitoring children was a key factor that contributed to return stability⁴⁵.

The reason this is particularly important for Looked After Children has been highlighted in a study by Biehal et al (2015). This study compared decision-making for 149 maltreated children in seven English authorities (68 reunified, 81 who remained in care) as well as outcomes six months and four years after the return home or decision to remain in care. The two key predictors of reunification were assessments that parental problems had improved and that assessed risks to safety of the child were not unacceptably high. However, one-third of children were returned home despite persisting concerns about unchanged or even worsened family circumstances. Consequently, 35% re-entered care within six months and 63% re-entered at some point during the four-year follow-up period, often due to recurring abuse or neglect. At the final follow-up, positive outcomes were more likely to be experienced by children remaining in care as opposed to those who had returned home, even once children's characteristics and histories were taken into account. Neglected children who had been reunified experienced particularly poor outcomes, regardless of whether reunification was stable or unstable. The authors concluded that due to the high rate of care re-entry and reoccurrence of abuse or neglect, appropriate monitoring and support should be provided after the return to ensure children's safety and well-being.

⁴⁴ Wilkins, M. and Farmer, E. (2015) *Reunification: An Evidence-Informed Framework for Return Home Practice*. Bristol: University of Bristol.

⁴⁵ Farmer, E. and Wijedesa, D. (2012) The Reunification of Looked After Children with their Parents: What Contributes to Stability? *British Journal of Social Work* 44 (2). p.348-366.

**A Sustainable Children's Social
Care System for the Future**

Annual Report of the Director of Public Health 2017

10 January 2018	ITEM: 11 Decision 0110453
Cabinet	
Local Council Tax Scheme	
Wards and communities affected: All	Key Decision: Key
Report of: Councillor Shane Hebb, Portfolio Holder for Finance	
Accountable Assistant Director: Sean Clark, Director of Finance and IT	
Accountable Director: Sean Clark, Director of Finance and IT	
This report is public	

Executive Summary

Since 1 April 2013, the Council has maintained a local Council Tax Reduction scheme. This replaced the national Council Tax Benefit scheme, which ended on 31 March 2013. Council Tax Reduction helps provide support to council taxpayers who have a low income. It supports the taxpayers by providing a reduction in the actual amount in Council Tax payable.

The current Local Council Tax Support (LCTS) scheme was implemented on 1 April 2017. Thurrock Council agreed its current scheme through a public consultation exercise informed by cross party Members working groups. The resulting scheme was agreed by both Cabinet and the Council.

The proposal for 2018/19 is to continue with the current Local Council Tax Support (LCTS) scheme. We have considered this in light of no planned changes to Housing Benefit legislation for April 2018/19 and that the current scheme is reasonable and fit for purpose.

1. Recommendation

1.1 That Cabinet recommend to Council that there are no changes to the scheme for 2018/19.

2. Introduction and Background

2.1 The design of each LCTS scheme must be finalised by 31 January ahead of the relevant year to which it relates. Failure to provide a scheme by this date will trigger the implementation of a default government scheme. The default scheme would require the council to revert back to the level of support that

would have been provided under the national Council Tax Benefit arrangements.

2.2 Local authorities take on the risk that liabilities under LCTS exceed the amount projected for at the start of the relevant financial year. This risk is shared between billing and major precepting authorities with circa 15% of the council tax collected by the council being paid over to the Essex County Fire and Rescue Service and Essex Police.

2.3 The existing Scheme contains the following elements:

- The first £25 per week of earned income will be disregarded when calculating levels of council tax support;
- The maximum capital limit is to be set at £6,000. This means anyone who has savings over £6,000 may not receive support with their council tax;
- For working age claimants, the maximum support that will be allowed will be 75% of their full council tax bill;
- Child benefit and child maintenance received will not be included as income in the calculation of council tax support;
- The maximum period a claim can be backdated under the scheme is 1 calendar month. A good reason for not claiming earlier has to be provided;
- There is a full disregard of military compensation payments, including War Disablement Pensions, War Widow's Pension and Armed Forces Compensation Scheme payments;
- The number of dependants assessed in the calculation of claimants needs is a maximum of two; and
- The maximum period of an award when temporarily absent outside the United Kingdom is 4 weeks.

3. Issues, Options and Analysis of Options

3.1 From 2014/15, any specific funding for the LCTS scheme was rolled up into the Revenue Support Grant (RSG) as provided to local authorities by the government. It is entirely for local authorities to decide how much they are prepared to spend on their LCTS scheme. Officers have also reviewed the structure of the scheme and noted the cost of the scheme has reduced from £8.5m to approximately £8.0m since 1 April 2013. This has increased the Council Tax Base and reduced the cost of the scheme since inception. Given these findings officers recommend continuing the scheme based on the same principles.

3.2 The roll out of Universal Credit has slowed nationally with the completion date of the project now extended to 2023. New Housing Benefit legislation is now forming part of the Welfare Reform agenda with this benefit continuing until at least 2023. When Local Council Tax Support began in 2013 it was expected the Universal Credit would be rolled out by 2017 replacing Housing Benefit for Working Age customers. Universal Credit in Thurrock advanced to 'full service' on 25 October 2017. This will extend the range of customers who can make a new claim for Universal Credit from single non-working households to couples and families with less than 3 children. Officers will monitor the effects of this change over the next 12 months and this will inform the design of the 2019/20 LCTS scheme.

3.3 Some components of the LCTS scheme have been directed by Government such as:

- All low income pensioners will be protected under the national framework as defined by DCLG;
- Consideration for protection for vulnerable working age groups will be allowed for; and
- Each authority's scheme will maintain work incentives wherever possible. The Government continues to stress the importance of this principle given the current economic climate and their welfare reform agenda.

4. Reasons for Recommendation

4.1 The scheme remains affordable and easy to administer. The collection rate for 2016/17 for council tax from those in the scheme was 96.64 percent. The design of the scheme, which builds in various protections and incentives, supports a high collection rate.

4.2 The LCTS expenditure for 2016/17 was £7.8m. The expenditure for 2017/18 is estimated to be circa £8m of which circa £3.7m relates to claimants of pensionable age. The expected cost of the scheme for 2018/19 is proposed at £8.3m to allow for any potential additional cost to the scheme.

4.3 The introduction of Universal Credit in the Authority for single unemployed people has not made any significant change to the amount of LCTS awarded to claimants.

5. Impact on corporate policies, priorities, performance and community impact

5.1 The Council is required to have an LCTS scheme and the proposed scheme meets this requirement. The scheme supports claimants in the community

and ensures the revenue raised is collectible supporting the medium-term financial strategy.

- 5.2 The Council also has a fair debt policy and this is reflected in the collection of council tax from claimants in the scheme.

6. Implications

6.1 Financial

Implications verified by: **Jonathan Wilson**
Chief Accountant

The financial implications are set out in the body of the report.

6.2 Legal

Implications verified by: **David Lawson**
Assistant Director of Law & Governance and
Monitoring Officer

The Council Tax Benefit system was abolished by Section 33 of the Welfare Reform Act 2012. The Local Government finance bill prescribed certain steps in the design of a local scheme, such as consultation and publication, and enables the Secretary of State to introduce both regulations and guidance relating to local schemes. The Government has included regulations to ensure that pensioners will not lose or gain relative to the previous system.

The LCTS scheme must be ratified by full Council by the 31 January 2018 at the latest to enable the authority to implement the scheme from 1 April 2019.

6.3 Diversity and Equality

Implications verified by: **Natalie Warren**
Community Development and Equalities
Officer

The Council has a duty as set out in the Equality Act 2010 to consider the equality impact of its policies and decisions. The LCTS can be claimed by anyone in the Borough meeting the eligibility criteria.

It is also noted a consultation on the proposed scheme has been available for all residents to respond to and these comments have been considered within the body of this report.

6.4 **Other implications** (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder)

N/A

7. **Background papers used in preparing the report** (including their location on the Council's website or identification whether any are exempt or protected by copyright):

- Working Papers held by Corporate Finance

8. **Appendices to the report**

- None

Report Author:

Sean Clark

Director of Finance and IT

This page is intentionally left blank

10 January 2018		ITEM: 12 Decision 0110454
Cabinet		
South Essex 2050		
Wards and communities affected: All	Key Decision: Key	
Report of: Councillor Mark Coxshall, Portfolio Holder for Regeneration		
Accountable Assistant Director: Steve Cox, Corporate Director of Place		
Accountable Director: Steve Cox, Corporate Director of Place		
This report is Public		

Executive Summary

The purpose of this report is to:

1. Explain the work undertaken by Leaders and Chief Executives of South Essex Councils - Basildon, Brentwood, Castle Point, Rochford, Southend-on-Sea, Thurrock and Essex County Council - to create a vision and sense of place for the area;
2. Describe the work undertaken by Planning Portfolio Holders/Cabinet Members on the strategic planning policy work necessary to underpin the work in point 1 above, including agreement to act as a pilot scheme for Government in creating a Statement of Common Ground;
3. Seek agreement to further collaboration on the work described in points 1 and 2 above, and to allocate appropriate resources to this as well as submit a bid for funding to the Government's Planning Delivery Fund to assist with this;
4. Further to point 3 above, agree to form a Joint Committee with the title of the Association of South Essex Authorities;
5. Seek agreement to make progress towards the preparation and delivery of a statutory joint strategic plan with an agreed timetable.

1. **Recommendations that Cabinet:**
 - 1.1 **Notes and supports the progress made by Leaders and Chief Executives on strategic place shaping in the South Essex 2050 Vision.**
 - 1.2 **Notes and supports the expression of interests endorsed by Planning Portfolio Holders/Cabinet Members to become a pilot of the Government's Statement of Common Ground for plan-making.**
 - 1.3 **Notes and supports a programme of further collaboration on key strategic place shaping and cross boundary planning policy matters, and agrees to allocate appropriate additional resources to support this.**
 - 1.4 **Notes and supports the expression of interest submitted to the Government's Planning Delivery Fund for up to £250,000 for assistance with joint working.**
 - 1.5 **Notes and supports the creation of a Joint Committee with the title of "Association of South Essex Authorities" as the overarching body responsible for managing these initiatives.**
 - 1.6 **Notes and supports the preparation and delivery of a statutory joint strategic plan for South Essex to ensure that cross boundary strategic planning issues are dealt with in an appropriate way.**

2. **Introduction and Background**

- 2.1 The National Planning Policy Framework (NPPF) 2012 explains at paragraph 178 that;

*"Public bodies have a duty to co-operate on planning issues that cross administrative boundaries, particularly those which relate to the **strategic priorities** set out in paragraph 156. The Government expects joint working on areas of common interest to be diligently undertaken for the mutual benefit of neighbouring authorities."*

- 2.2 Planning Practice Guidance (PPG) 2014 at Paragraph: 007 Reference ID: 12-007-20140306 further explains that;

"The duty to cooperate requires local planning authorities and certain other public bodies to cooperate with each other in preparing a Local Plan, where there are matters that would have a significant impact on the areas of 2 or more authorities. A joint Local Plan is one means of achieving this and those preparing Joint Plans will wish to consider a joint evidence base and assessment of development needs. Less formal mechanisms can also be used. In particular, local planning authorities should consider the opportunities

for aligning plan timetables and policies, as well as for sharing plan-making resources.”

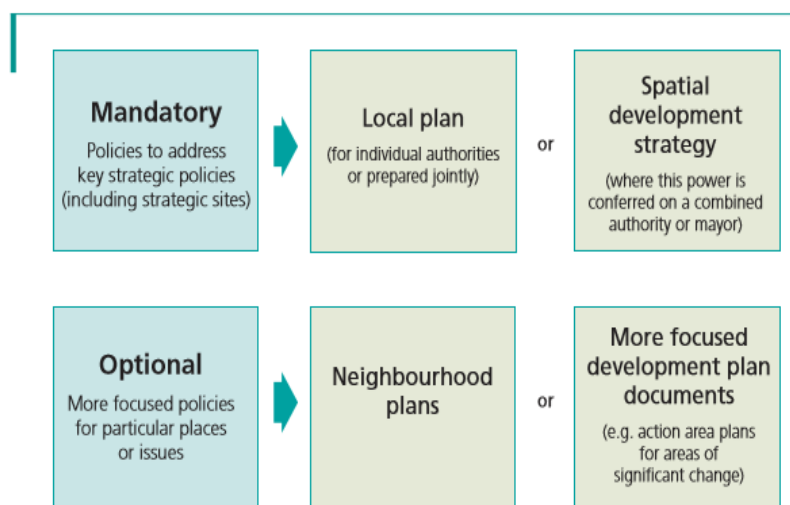
2.3 The Housing White Paper *“Fixing our Broken Housing Market”* published in February 2017, described more clearly the Government’s direction of travel regarding strategic planning. In paragraph 1.9 it explains that:

“..... we will consult on changes to the National Planning Policy Framework, so that authorities are expected to prepare a Statement of Common Ground, setting out how they will work together to meet housing requirements and other issues that cut across authority boundaries.”

2.4 Furthermore, in the Annex at paragraph A.16 it states that;

“As suggested by the Local Plans Expert Group, we will remove the policy expectation that each local planning authority should produce a single local plan. We will make clear instead that authorities should identify the most effective way of setting out their key strategic priorities (which may be jointly with other authorities), with the expectation that more detailed matters are addressed through neighbourhood plans or more focused development plan documents”

2.5 This model of development plan preparation is described by Government in the illustration below:



2.6 Finally in his recent speech of 16th November 2017, the Secretary of State announced that he had written to 15 local planning authorities expressing concern at lack of progress with plan-making. 3 of the fifteen authorities are in south Essex – Basildon, Brentwood and Castle Point.

2.7 In deciding whether to intervene in local plan-making, the Secretary of State wishes to *“.....be informed by the wider planning context in each area (specifically the extent to which authorities are working co-operatively to put strategic plans in place...”*

- 2.8 It is therefore evident that the Government accepts that the “duty to co-operate” is not an effective mechanism for strategic planning across local authority boundaries, through its recent announcements and imminent reforms, and that joint statutory strategic plans are seen as the best way to achieve more effective mechanism for delivering growth, and by providing a framework for the preparation of other local development plan documents.

3. South Essex

History of Joint Work

- 3.1 The local planning authorities in South Essex have for some time been defined as Basildon, Castle Point, Rochford, Southend-on-Sea, Thurrock and Essex County Council. More recently Brentwood has been incorporated in the group, given its close relationship with Basildon, Thurrock and key infrastructure affecting the area, such as the A127.
- 3.2 There is a long established tradition of working in partnership on strategic planning matters, dating from the era of the former Thames Gateway South Essex Board. Examples of this work include a Planning & Transport Strategy for the Thames Gateway South Essex area, a series of Strategic Housing Market Assessments, Strategic Flood Risk Assessments, and more recently an Economic Development Needs Assessment.
- 3.3 Furthermore Planning Portfolio Holders/Cabinet Members acknowledged in 2016 that a strategic planning framework of some kind was necessary for the area in order to assist with the preparation of individual local plans and demonstrate that the “duty to cooperate” was being effectively discharged. A Memorandum of Understanding for Strategic Planning in South Essex was subsequently agreed in early 2017.

Leaders & Chief Executives

- 3.4 Following discussions regarding devolution at an Essex level, and having regard to the “duty to cooperate” failings identified by the Planning Inspector examining the Castle Point Local Plan in early 2017, Leaders and Chief Executives of the seven authorities have come together to describe overarching strategic principles for South Essex. This work has been supported by the East of England Local Government Association, recognising that it could act as a model for other areas of local government.
- 3.5 The Leaders and Chief Executives have met on a regular basis since the summer of 2017. Their meetings, a series of workshops have been facilitated by an independent consultant, and supported by independent strategic planning advice.
- 3.6 The purpose of the discussions has been to prepare a strategic “vision” for the area, which goes beyond the normal 15 year time frame of local plans, and beyond the normal confines of strategic planning policy but embraces a range

of public and private enterprises that together have the ability to create a sense of place.

South Essex Vision 2050

- 3.7 The work has an interim title of “South Essex Vision 2050” and its intention has been to describe a joint “place-based” vision, together with the growth and strategies necessary to support this, the infrastructure required in the area, and how local authorities might work together to deliver these aspirations.
- 3.8 It is accepted and agreed by the Leaders and Chief Executives that the shared mutual ambitions for South Essex require a “no border” approach to collaboration and joint working. It is only by working more closely together the major challenges in the area can be addressed, and opportunities taken forward.
- 3.9 Consequently following extensive discussion, working together the Leaders and Chief Executives have agreed on eight industrial and infrastructure strategic priorities for the area;
1. *Place leadership, proposition and brand*
 2. *Opening up spaces for development (green infrastructure, housing and commercial)*
 3. *Transforming transport connectivity*
 4. *Supporting our seven sectors of industrial opportunity:*
 - *Advanced manufacturing*
 - *Construction*
 - *Environmental technologies and energy*
 - *Digital and creative services*
 - *Finance and business services*
 - *Life sciences and healthcare*
 - *Transport and logistics*
 5. *Shaping local labour and skills markets*
 6. *Creating a fully digitally-enabled place*
 7. *Securing a sustainable energy supply*
 8. *Enhancing health and social care through co-ordinated planning.*
- 3.10 South Essex Leaders and Chief Executives are committed to continuing with the “vision” work beyond January 2018. This includes formalising the collaboration by creating an Association to:

- Prepare an initial statement of intent explaining what has been done through the work shop programme and how it is intended to take the collaboration forward
- Build a forward plan of work to fully develop the outline proposition and ideas created through the work shop programme
- Implement a wider engagement plan and programme

This includes three key tasks

- Design a place proposition to promote South Essex
- Take a joined – up and strategic approach to growth and spatial planning
- Co-ordinate an infrastructure strategy delivering a series of game – changing initiatives.

Planning Portfolio Holders and/or Cabinet Members

- 3.11 Planning Portfolio/Cabinet Members have been briefed and kept informed of the Leaders and Chief Executives work. In order to assist with the work, at their meeting in October 2017, Planning Portfolio/Cabinet Members agreed to send a joint South Essex response to the recent Government consultation on “*Planning For The Right Homes In The Right Places*” and more importantly to offer South Essex as a pilot scheme for the preparation of a Statement of Common Ground, as described in the Housing White Paper. Officials at the Government have welcomed this offer and are keen to make progress with this.

Future leadership and governance in South Essex

- 3.12 Leaders and Chief Executives recognise that this important work “vision” and strategic planning work should be accorded appropriate priority and funding to ensure that the successful collaboration is carried forward and is robust enough to withstand the traditional electoral cycle and potential for change. Examples of governance and leadership from other parts of the country have been examined and of most interest is the creation of a Joint Committee, supported by Chief Executives which would provide strategic direction on policy formulation, delivery and implementation. Each constituent authority would retain sovereignty over local matters but would acknowledge and accept that the work of and direction from the Joint Committee would be in the overall best interests of the area as a whole.
- 3.13 The working title of the Committee is the “Association of South Essex Authorities”, comprising the councils of Basildon, Brentwood, Castle Point, Rochford, Southend–on-Sea, Thurrock and Essex County Council. A Memorandum of Understanding has been prepared by the authorities describing the necessary governance arrangements, as has a prospectus describing work completed to date and next steps.

Potential funding

- 3.14 These decisions have coincided with the recent announcement by Government of a Planning Delivery Fund, again heralded in the Housing White Paper earlier in the year. The Government's intention is that the Fund would support:
- more and better joint working, across local authority boundaries, ensuring that there are the skills and capacity where they are needed to plan strategically for housing growth, and to manage delivery of new homes and infrastructure;
 - a step change in the design quality of new development, as well as design advice and support to local authorities delivering growth; and,
 - innovation in the planning system, to improve the efficiency and effectiveness of processes and enable the delivery of more high quality homes.
- 3.15 Expressions of interests for funding are invited by 11th January 2018, and the Government is expected to announce the successful bids by the end of January. For joint working and design, successful bids are expected to be up to £250,000 per bid for expenditure incurred by the end of March 2018. For innovation, no award amount information is yet available since this will be dependent on the number and nature of bids.
- 3.16 The Government has made clear that bids will need to demonstrate:
- Scale and strength of ambition and commitment to housing growth – for example by showing that the activity funded will contribute to the area planning to meet or exceed local housing need in the future, and accelerate effective planning across authority boundaries;
 - Strength of commitment to joint working; and
 - Strength of proposal and timetable for delivery of the joint planning work.
- 3.17 In making awards, priority will be given to those groups of authorities with the highest housing need, where affordability is a major issue, or where funding is necessary to overcome difficult planning issues; for instance, to distribute unmet housing needs in highly constrained areas or plan for infrastructure across a wider geography.

Joint statutory strategic plan

- 3.18 Given the commitment demonstrated by South Essex authorities to continue joint working it is recommended that a bid be submitted on behalf of the 7 authorities to support further joint work on governance and on preparation for strategic planning.
- 3.19 Furthermore since the Government's expectation is that local planning authorities should cooperate effectively to plan for issues with cross boundary

impacts, and that joint plans and strategies are the preferred means by which this may be demonstrated, it will be necessary for South Essex to agree to make progress on the preparation, publication and delivery of a joint statutory strategic plan.

- 3.20 The agreed Memorandum of Understanding can be updated to reflect this new approach, and the Statement of Common Ground can describe the strategic cross-boundary matters to be addressed, the means by which the analysis and distribution of growth can be agreed and the priorities for infrastructure investment, and the risk to delivery of growth if that investment is not made available.
- 3.21 The benefits of working on a joint statutory strategic plan for south Essex, as opposed to work on individual local plans can be summarised as follows;
- **Provide a more effective way of place-shaping**, providing a bigger canvas to direct development to the right areas that deliver growth and that are (or can be) supported by the right infrastructure.
 - **Deliver potentially significant cost savings** as a result of a combined plan-making process (e.g. local plan examinations; public consultation and stakeholder engagement; evidence-base) and a more efficient and effective use of staff resources.
 - **Increase funding opportunities and secure wider support from Government**, with a strong emphasis on joint plans in all Government bidding processes (e.g. Housing Infrastructure Fund and Planning Delivery Joint Working Fund) and set the potential for a bespoke housing deal to deliver strategic infrastructure.
 - **Help local planning authorities manage housing delivery more effectively** (e.g. the Government is proposing to allow 5 Year Housing Land Supply and Housing Delivery Tests to be managed across strategic areas where there is a joint local plan in place).
 - **Provide a more robust and coherent basis for negotiating with the GLA/ Mayor** to ensure that there are mutual benefits arising from London's growth.
 - **Help deliver a technically sound and legally compliant local plan** (e.g. by demonstrating that the "duty to co-operate" has been met) through examination.
- 3.22 Having reviewed the current position with local plan preparation a transition from that approach to a joint statutory strategic plan is manageable and deliverable.
- 3.23 The following steps would need to be put in place to demonstrate commitment to this new work:

- Commitment from all Councils to prepare a joint spatial plan in January 2018 in time to meet the Secretary of State's deadline for responses to his intervention letter.
- Working and governance arrangements to support preparation of the new plan should be agreed by the end of February 2018, with work initiated as soon as possible from this date.
- Working and governance arrangements, a provisional timetable for the plan, evidence base requirements and other key information should be set out in a draft Statement of Common Ground by the end of March 2018.
- All South Essex Authorities to update their Local Development Scheme with details of the joint strategic plan process and timetable and how their individual local plans relate to this, by the end of April 2018.

4. Issues, Options and Analysis of Options

Timescales for Implementation and Risk Factor

- 4.1 South Essex Leaders and Chief Executives are committed to continuing with the "vision" work beyond January 2018, and for this reason are presenting this report to all constituent authorities for consideration in early 2018.
- 4.2 Expressions of interest for funding bids must be with the Government by 11th January 2018, and a draft expression has been submitted in order not to lose this important opportunity. The progress of the 2050 work will not be affected if the bid is not successful.
- 4.3 The three South Essex local planning authorities which have received the letter regarding intervention from the Secretary of State have been asked to respond by 31st January 2018.
- 4.4 The risks of not pursuing further collaborative work across South Essex are not simply confined to those three named local planning authorities - if the Secretary of State were to decide to intervene in those three councils, the preparation of local plans across other South Essex councils would be more complicated by for example not being able to demonstrate effective strategic planning and requiring a significantly greater number of Statements of Common Ground with the risk that agreed strategic infrastructure priorities may not be aligned.
- 4.5 Although the preparation of a joint plan may take as long as a conventional plan, it does represent an opportunity to demonstrate strategic planning across local authority boundaries and bring forward key strategic sites.

Conclusions

- 4.6 There has been significant recent work undertaken across South Essex in recent months to understand the importance of and develop ideas around place making and the role which strategic planning can perform in delivery of infrastructure and growth.
- 4.7 The publication of the “South Essex Vision 2050” by Leaders and Chief Executives has provided context, and Planning Portfolio Holders/Cabinet Members are keen to play a role as a pilot for the Government’s Statements of Common Ground.
- 4.8 In developing the “South Essex Vision 2050” it is fundamental that a “no border” approach to collaborative and joint working is required. It is only by working more closely together the major challenges the area can be addressed and opportunities taken forward.
- 4.9 The natural progression of this work is to ensure that suitable governance arrangements are in place, to allow joint work to progress whilst respecting the “sovereignty” of individual local planning authorities, to ensure that the right level of resources is available, and to make progress with the preparation and delivery of a joint strategic plan.

5. Reasons for Recommendation

- 5.1 Agreement to the recommendations is required in order for Thurrock Council to continue its joint work with other South Essex authorities.

6. Implications

6.1 Financial

Implications verified by: **Carl Tomlinson**
Finance Manager

The cost of preparing an individual local plan can be significant. The preparation, collection and analysis of evidence, extensive consultation requirements, legal and specialist technical advice, and then engagement of Programme Officers and Planning Inspectors at Examination are likely to result in substantial sums.

The benefits of aligning this expenditure with joint strategic planning work are evident from paragraph 4.20 above. However it is unlikely that planning policy resources alone will be sufficient to bring about the step change required to deliver a joint strategic plan.

It is therefore necessary not only to seek additional Government funding of up to £250,000 through the Planning Delivery Fund, but also to augment this with further resources at each individual local planning authority level for joint work.

At this stage a provisional sum of £75,000 has been suggested, although this may need to be revised should the bid for Government funding not prove successful.

6.2 Legal

Implications verified by: **David Lawson**
Assistant Director of Governance & Law and Monitoring Officer

Section 101 of the Local Government Act 1972 allows a local authority to perform any of its functions jointly. Section 50 of the Town & Country Planning Act 1990 allows for the joint preparation of local plans.

The Housing & Planning Act 2016 at Section 146 introduced powers to allow the Secretary of State to intervene where he believes that a local planning authority has not prepared a development plan.

Section 9 of the Neighbourhood Planning Act 2017 will give the Secretary of State the power to direct local planning authorities to prepare joint development plans.

6.3 Diversity and Equality

Implications verified by: **Natalie Warren**
Community Development & Equalities Manager

There are none arising directly from this report.

6.4 Other implications (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder)

There are significant planning resource implications arising from a commitment to prepare a joint local plan. A number of South Essex local planning authorities have found it difficult to fill planning policy posts if vacant, simply to continue with existing commitments.

The introduction of a new work stream associated with a joint local plan will add pressure to existing resources, and additional resources will be necessary to attract and retain key planning policy staff in the area.

However the prospect of being involved with ground breaking sub-regional planning policy work across a number of authorities may well prove to be an aid in recruitment.

The work described in Section 4 above will allow all local planning authorities in the area to demonstrate effective on-going cooperation on strategic planning matters, thereby satisfying the “duty to cooperate”.

Where those local planning authorities are in the advanced stages of preparing or submitting a local plan for its area, the intention is that work on that plan should proceed, and be seen as supporting the ultimate delivery of a joint strategic plan by putting in place initial policies and proposals and early review mechanisms which will support and feed in to a subsequent joint plan.

Where those authorities have been identified by the Secretary of State of being at risk from intervention, the work described in Section 4 demonstrates on-going commitment to joint working on strategic planning matters as advocated by Government.

Furthermore for those authorities with no up-to-date local plan or five year housing land supply, the on-going commitment to joint working on strategic planning matters is likely to prove an important material consideration in resisting unwelcome or ill-timed development proposals, pending the completion of the joint strategic plan.

7. Background papers used in preparing the report (including their location on the Council’s website or identification whether any are exempt or protected by copyright):

- Memorandum of Understanding for Strategic Planning in South Essex 2017

8. Appendices to the report

- Appendix 1 - Memorandum of Understanding for Strategic Planning in South Essex 2017

Report Author:

Steve Cox

Corporate Director of Place

Association of South Essex Local Authorities

Memorandum of Understanding

between

Basildon Borough Council
Brentwood Borough Council
Castle Point Borough Council
Essex County Council
Rochford District Council
Southend on Sea Borough Council
Thurrock Council

1. Background

- 1.1 Stemming from housing and local planning issues initially, there has been a growing recognition of the opportunity and need for greater cross-boundary working on strategic infrastructure planning and growth across South Essex. In June 2017 Leaders and Chief Executives of Basildon, Brentwood, Castle Point, Rochford, Southend–on-Sea, Thurrock and Essex County Council (the Authorities) agreed to initiate and shape a programme of work through the summer and autumn to explore a joint ‘place vision’ and the scope for greater strategic collaboration along the South Essex growth corridor.
- 1.2 The work during the summer and autumn has resulted in an emerging vision and identification of strategic growth opportunities that need testing and strengthening with the people and stakeholders of South Essex and beyond. It has also built a strong commitment amongst the Authorities to collaborative working. It was agreed that an Association of South Essex Local Authorities (ASELA) should be established to continue this collaborative work.
- 1.3 The Authorities wish to record the intention to establish ASELA and basis of our collaboration through a Memorandum of Understanding (MoU). This MoU sets out:
 - a) The core purpose and aims of ASELA
 - b) The principles of collaboration

2. Core Purpose and aims

- 2.1. The core purpose of ASELA is to provide place leadership for South Essex. Recognising that through our collaborative approach we will be best placed to develop and deliver a vision for South Essex up to 2050, promoting healthy growth for our communities.
- 2.2. ASELA will focus on the strategic opportunities, regardless of individual local authority boundaries for the South Essex economic corridor to influence and secure the strategic infrastructure that will help our individual areas to flourish and realise their full economic and social potential.
- 2.3. The aims of ASELA will be to:
 - Provide place leadership;
 - Open up spaces for housing, business and leisure development by developing a spatial strategy;
 - Transform transport connectivity;
 - Support our 7 sectors of industrial opportunity;
 - Shape local labour & skill markets;
 - Create a fully digitally-enabled place;
 - Secure a sustainable energy supply;
 - Influence and secure funding for necessary strategic infrastructure; and
 - Enhance health and social care through co-ordinated planning.

3. Principles of collaboration

- 3.1. Our collaboration will be focused on three key areas:
 - Tackling problems we can't solve individually
 - Creating collective scale and impact
 - Providing the place leadership to promote and sell the 'South Essex' proposition
- 3.2. The Authorities agree to adopt the following principles in working together:
 - We are all in this together – and stronger if we work together
 - We should build our governance incrementally – learning from the lessons from other places who are more advanced
 - Through our collaboration we should be gaining something not losing something
 - Local identities should not be lost
 - We need to be a voice for South Essex

4. Term and Termination

- 4.1. This MoU shall commence on the date of the signature by each Authority, and shall expire if ASELA dissolves.

5. Variation

5.1. The MoU can only be varied by written agreement of all the Authorities.

6. Charges and liabilities

6.1. Except as otherwise provided, the Parties shall bear their own costs and expenses incurred in complying with their obligations under this MoU.

7. Status

7.1. This MoU cannot override the statutory duties and powers of the parties and is not enforceable by law. However the parties agree to the principles set out in this MoU.

Signed by.....

Basildon Borough Council

Brentwood Borough Council

Castle Point Borough Council

Essex County Council

Rochford District Council

Southend on Sea Borough Council

Thurrock Council

This page is intentionally left blank

10 January 2018	ITEM: 13 Decision 0110455
Cabinet	
Extension of Home to School Transport Contracts (2018-2019)	
Wards and communities affected: All	Key Decision: Key
Report of: Councillor Halden, Portfolio Holder for Education and Health	
Accountable Assistant Director: Sue Green, Strategic Lead Children’s Commissioning and Service Transformation	
Accountable Director: Rory Patterson, Corporate Director of Children’s Services	
This report is: Public	

Executive Summary

A review of transport services provided across the Council is underway to ensure that the Council is meeting the needs of residents whilst achieving value for money.

All current home to school transport contracts expire in July 2018 and would usually be re- procured to ensure that the current and new contracts run concurrently.

Should the home to school transport contracts be re-procured now, any benefits arising from the transport service review would either not be realised for a number of years, or require quick succession of another procurement process, causing substantial disruption to the service and duplication of costs. It is, therefore, recommended that the existing contracts are extended for one year.

Members have the option to extend the contracts in compliance with Section 14 of the Council’s Contract Procedure Rules. To do this, members need to waive the requirement for a competitive tender and invoke the provisions of Section 13 on Waivers of the Councils Contract Procedure Rules and agree to the extension of the current contracts. This must meet the conditions set out in Regulation 72 of the Public Contracts Regulations 2015. This paper sets out how these will be met.

1. Recommendations that Cabinet:

- 1.1 **Agree to extend the current home to school contacts for one year from July 2018 as provided by section 14 of the Councils Contract Procedure**

Rules pending the outcome of the current service review.

- 1.2 Agree to waive the requirement to complete a competitive tender as provided by section 13 of the Council's Contract Procedure Rules for one year.**
- 1.3 Approve the continuation of the current arrangements for delegated authority for the Corporate Director of Children's Services in consultation with the relevant portfolio holder to approve the award of these contracts for the period of the extension requested.**
- 1.4 That a further paper outlining the service changes and seeking approval to enter into a competitive tender process in line with the Council's Contract Procedure Rules is presented to Cabinet in November 2018.**

2. Introduction and Background

- 2.1 The provision of home to school transport is governed by statute, the Education Act 1996 and the Transport Act 1985 and is a statutory duty of the Council.
- 2.2 The letting of the home to school transport contracts is a key decision due to the total value.
- 2.3 The Council, through previous procurement exercises agreed by Cabinet, currently has approximately 142 home to school transport routes, provided by 31 bus, coach, minibus and taxi providers.
- 2.4 There are two distinct areas of home to school transport:
 - **Mainstream schools** - where for example distance / safety of a route to school require the Council to provide school transport. In such cases there is a statutory duty to offer transport.
 - **Special schools** – A statutory duty to offer transport subject to the pupil meeting the relevant criteria.
- 2.5 The current contract value is approximately £4.5m per annum. This amount fluctuates due to changes in demand where the immediate implementation of additional route contracts is needed.
- 2.6 As part of the Council's Service Review Programme, a review of transport services provided across the Council is underway to ensure it is meeting the needs of residents whilst achieving good value for money.
- 2.7 The current home to school transport contracts expire in July 2018, however, the transport services review will impact how home to school transport is commissioned in the future.

3. Issues, Options and Analysis of Options

3.1 The transport service review mentioned in 2.6 has the following scope:

- To review the current strategy and policy
- To better understand demand and support future planning
- To review the assessment of transport awards and where this could be better joined up across services and directorates
- To identify opportunities to better meet transport requirements in a cost effective way
- To identify opportunities to better commission transport

3.2 The review presents the Council with the potential to improve its transport offer for eligible pupils and achieve better value for money for the Council whilst ensuring the policy is clear for parents and applied effectively.

3.3 All current home to school transport contracts expire in July 2018 and would usually be re-procured to ensure that the current and new contracts run concurrently. The current service review means should this be done, any benefits of revised ways of operating, such as improved route planning or synergy of resources, would not be realised. It is, therefore, recommended that the existing contracts are extended for one year.

3.4 Members have the option to extend the current contracts in compliance with Section 14 of the Councils Contract Procedure Rules. To do this, members need to waive the requirement for a competitive tender and invoke the provisions of Section 13 on waivers of the Councils Contract Procedure Rules and agree to the extension of the current contracts. The extension must also meet the conditions set out in Regulation 72 of the Public Contracts Regulations 2015 (PCRs 2015).

3.5 Regulation 72 of the Public Contract Regulations 2015 gives provision to modify contracts during their term subject to the fulfilment of certain conditions for example where services provided by the original contractor have become necessary, and even though not included in the initial procurement, a change of Contractor cannot be made for economic or technical reasons or will cause significant inconvenience or duplication of costs for the Council provided that any increase in price does not exceed 50% of the value of the original contract. Additionally, if the need for modification has been brought about by circumstances which a diligent contracting authority could have not have foreseen and the modification does not alter the overall nature of the contract; and, any increase in price does not exceed 50% of the value of the original contract or framework agreement then there is also provision to modify contracts.

- 3.6 The current contract value is approximately £4.5m per annum with the overall contract value £12.839m. Therefore, if approved, a one year extension would not exceed 50% of the original contract value.
- 3.7 If the current contracts were to be re-procured now, the procurement exercise would likely need to be repeated at the end of the review which would be a duplication of costs to the Council, and would cause substantial disruption for children, particularly those with SEND.
- 3.8 Many of the changes needed for the home to school transport contracts are the result of increasing demand that has been difficult to predict, and, if extended, the overall nature of the current contracts would not change as they would operate within the existing arrangements.
- 3.9 The ongoing changing nature of these contracts means that it is recommended that authority to award contracts continues to be delegated to the Corporate Director for Children's Services, reporting back to the Portfolio Holder. This is in line with the Council's Constitution. The report back to the Portfolio Holder will detail the selection procedure, the results of the process, and evidence of compliance with the Public Contract Regulations and the Council's Contract Procedure Rules.
- 3.10 On completion of the current transport review, any revisions to the current policy and process will be made. As this may require consultation with existing users it is recommended that a further report is presented to Cabinet in November 2018 to refresh the policy and seek permission to enter into a procurement exercise to ensure contracts are in place at the end of the extension period in 2019. It is important to stress that there will be no in-year changes to offers that have already been made. The review of transport is part of wider recovery plan for the Dedicated Schools Grant, which is currently overspent. The detail of this will be presented to Children's Overview and Scrutiny Committee.

4. Reasons for Recommendation

- 4.1 The current contracts for home to school transport expire in July 2018 and the ongoing service review is likely to include recommendations that will make material changes to the way the current routes and contracts are designed and provided. In order to adapt the home to school transport offer in the light of the review findings it is recommended that the current contracts be extended for one year. To enable this, a waiver of the requirement to enter into a competitive tender is required along with agreement to extend the current contracts.
- 4.2 The recommendation for continued delegated authority to approve contracts is made to provide the flexibility to meet the numerous changes required throughout the contract period to meet the needs of individual children and facilitate the smooth day-to-day operation.

4.3 In reporting any changes to the current policy alongside the request to enter into a competitive tender process in November 2018 members will have the opportunity to have an overview of the implementation of changes to the delivery of home to school transport and ensure that a robust offer is in place.

5. Consultation (including Overview and Scrutiny, if applicable)

5.1 This is a request to extend current activities and, therefore, there has been no consultation. However, the report to Cabinet due November 2018 will include any recommendations from Children's Overview and Scrutiny.

6. Impact on corporate policies, priorities, performance and community impact

6.1 This report impacts on the following corporate priorities:

- Create a place for learning and opportunity
- Improve health and wellbeing
- Promote and protect our clean and green environment

7. Implications

7.1 Financial

Implications verified by: **Nilufa Begum**
Management Accountant

Home to school transport costs have a significant impact on Council budgets. By extending the current contracts we can ensure that the recommendations from the review are implemented providing greater efficiencies in terms of service delivery.

7.2 Legal

Implications verified by: **Courage Emovon**
Contracts Lawyer

There is a legal requirement to re-tender the home to school transport Contracts as the value of these means they must be compliant with European procurement rules. However, members have the option to extend the current contracts as provided by Section 14 of the Councils Contract Procedure Rules. To do this, members need to waive the requirement for a competitive tender as provided by Section 13 of the Council's Contract Procedure rules and agree to the extension of the current contracts. This must meet the condition set out in Regulation 72 of the Public Contracts Regulations 2015.

Regulation 72 of the Public Contracts Regulations 2015 provides for modification of contracts during their term subject to the fulfilment of certain conditions and provided that any increase in price does not exceed 50% of

the value of the original contract. Where for example, the value for the extension exceeds 50% of the original contract value, that would be a breach of the provisions of Regulation 72 and potentially leave the Council open to a challenge. However in this instance, the current contract value for a one year extension does not exceed 50% of the original contract value and therefore meets the requirements of Regulation 72 of the Public Contracts Regulation 2015.

Section 508B of the Education Act 1996 which was inserted by Part 6 of the Education and Inspections Act 2006 sets out the general duties placed on local authorities to make school travel arrangement as they consider necessary for “eligible children” within their area, to facilitate their attendance at the relevant educational establishment. Such arrangement must be provided free of charge.

Section 508A places a duty on local authorities in England to assess the school travel needs of all children and persons of sixth form age in their area and to assess and promote the use of sustainable modes of transport.

Section 508C of the Act provides local authorities with discretionary powers to make school travel arrangements for other children not covered by section 508B, but the transport does not have to be free and the local authority is entitled to charge for this.

Section 508D of the Act places a duty on the Secretary of State to issue guidance to which local authorities have to have regard to in the performance of their functions under Section 508B (Travel arrangements for other children). The Secretary of State may revise the guidance from time to time.

As the service sought to be extended is a statutory duty, the Council can extend the contract to meet its statutory obligation subject to compliance with its Contract Procedure Rules and the Public Contracts Regulations 2015.

7.3 **Diversity and Equality**

Implications verified by: **Rebecca Price**
Community Development Officer

The Council has a statutory duty under the Equality Act 2010 to promote equality of opportunity in the provision of services and employment. This means that the Council must ensure that all policies and local strategies promote the inclusion of all groups and equality of opportunity. Any future tendering process will be designed with these duties in mind.

The option to extend the current arrangements for one year will ensure that the disruption to pupils will be minimised whilst the outcome of the service review is being finalised.

7.4 **Other implications** (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder)

None

8. **Background papers used in preparing the report** (including their location on the Council's website or identification whether any are exempt or protected by copyright):

- None

9. **Appendices to the report**

- Appendix 1 - Stage One Procurement Form

Report Author:

Sue Green

Strategic Lead Children's Commissioning and Service Transformation

This page is intentionally left blank

PROCUREMENT STAGE 1 – APPROVAL TO PROCEED TO TENDER

This form must be completed for all procurements above the tender threshold (£75,000 - Services and Supplies and £500,000 – Works)

If contract value is over Cabinet approval threshold (£750,000) this form shall be attached with the request to tender report to Cabinet. This form will be “Open” for Publication.

Section A: ABOUT THIS PROCUREMENT	
Title	Extension of Home to School Transport Contracts (One year from 19 July 2018-18 July 2019)
Directorate	Children's Services
Procurement Reference Number	PS/2017/**
Contract Cost (Maximum Spend)	£4.5m (Includes Ad- hoc spend of £.5m)
Budget code(s)	AA003, AA290, AA291, AA292 (There are several aspects to the Education Transport budget under different cost codes i.e. Mainstream, SEND, out-of-borough, Primary and Secondary)
Introduction and Background	<p><i>The Council has a statutory duty to provide certain forms of home to school transport. The Council presently lets approximately 143 contracts (31 operators) for home to school transport provision delivered by bus, coach, mini-bus and taxi. It also purchases public transport tickets on behalf of pupils and pays mileage to parents using their vehicles to transport their children to school.</i></p> <p><i>Schedule 35B of the Education Act defines an eligible child. The definition gives rise to the four distinct categories of eligibility for home to school transport. The Council has a statutory duty to provide transport under each of the categories below:</i></p> <p><i>Statutory walking distance eligibility</i> <i>Special Educational Needs, disability or mobility problems eligibility</i> <i>Unsafe route eligibility</i> <i>Extended rights eligibility</i></p> <p><i>Non-eligible pupils in challenging circumstances may be awarded transport where the Council exercises it's discretionary powers under the Exceptional Circumstances policy.</i></p> <p><i>Also, the immediate implementation of additional contracts is frequently required for new pupils who either move into the borough or move schools within the borough outside of the usual admissions application dates.</i></p> <p><i>The 143 contracts considered in this report form part of a framework under which 31 individual operators deliver home to school transport. The contracts expire in July 2018 and cover all routes. Agreement to extend these contracts is sought for a</i></p>

	<p><i>period of one year.</i></p> <p><i>This period is required to enable officers undergo a thorough review of a wide range of issues to ensure an effective and integrated Education and Social Care transport offer. Some of the issues to be considered will include the procurement process (including systems and software options), efficient route planning; adapting where feasible existing systems and routes designed by other Council departments, a reduction and centralisation of pupil pick-up / drop-off points, the management of in-year awards of transport and an integration of the home to school and social care offer into a system that meets the needs of all children requiring transport.</i></p>
Proposed Contract Term	1 year (19 July 2018 – 18 July 2019)
Political Sensitivity	N/A

Section B: COMMISSIONING REPORT

Business Case	<p>These contracts need to be extended to enable the Council continue to deliver its statutory obligations for home to school transport. The Education Transport review commenced in October 2017. The review has highlighted an opportunity to examine the current offer of Education Transport in order to ensure best value and reduce spend as explained in the introduction above.</p> <p>There are also economic, social and environmental benefits to be gained from an extension as the procurement of home to school transport contracts, whilst offered as a fully compliant EU tender, usually attracts local transport providers. These firms, particularly the small businesses, will benefit from an extended period of operation without having to engage resources and time in a procurement process.</p> <p>Also, the extension will provide officers with an opportunity to scrutinise existing routes with the aim of increasing efficiency; for example, by merging routes, accessing existing route planning systems where practicable and establishing centralised pick up / drop-off points as opposed to the current practice whereby pupils are collected from their individual homes. Officers will also use the extension period to work collaboratively with other service areas to design strategies to increase the number of pupils who access public transport or use sustainable travel methods such as walking or cycling.</p> <p>Such efficient procurement of transport aligns with the Council's priority around the protection of our clean and green environment as we will operate fewer vehicles, yet still meet our statutory obligation to transport eligible children. The Council's use of larger vehicles such as mini-buses and coaches to transport eligible children reduces the carbon footprint as fewer families will need to use personal vehicles to get their children to school.</p> <p>Once the findings of the review are considered and recommended changes to existing routes, policy and process are agreed, the Council will also need to re-tender the contracts. The extension will also ensure existing providers are given sufficient notice of the proposed procurement process and enable the Council engage with operators. This will prevent a situation where operators are unprepared and fail to engage in the process or decide to offer their services elsewhere. Any reduction in operators may impact pupils if the Council is unable to deliver transport as and when required.</p>
Key Deliverables (Draft Specification)	<p>The extension of the contracts will enable officers to implement the recommendations from the ongoing Education Transport service review. The expected changes to delivery include reduced spend across all aspects of home to school transport. The reduction will arise as a result of improved route planning, central collection and drop-off points for pupils (as opposed to the current door to door service), and the implementation of policy changes that will improve the Council's process ensuring that only eligible pupils and pupils under exceptional circumstances receive transport.</p>
Contractor Employment Status <small>(use self-assessment tool: https://www.gov.uk/guidance/check-employment-status-for-tax or contact Procurement for further guidance)</small>	<p>N/A</p>
Quality v Price evaluation	<p>N/A</p>
Social Value	<p>Social value was considered during the previous tender process and</p>

	will be considered in the 2019 tender process.
Current / Previous Contract details	PS/2013/626 PS/2014/835

FINANCIAL IMPLICATIONS						
Current / Previous Contract Cost	Previous contract value - £12.839m					
Cost Breakdown	Breakdown of Estimated Cost	16/17 £000's	17/18 £000's	18/19 £000's	Later £000's	Total £000's
	Total Spend	30% price	£2.25	£2.25	£	£4.5
Confirm Funding Breakdown Identified	Revenue Budget	£N/A	£	£	£	£
	Capital Budget	£N/A	£	£	£	£
	Other (Please State)	£N/A	£	£	£	£
	Other (Please State)	£N/A	£	£	£	£
	Total Funding	£N/A	£2.25	£ 2.25	£	£4.5
Budget Code(s)	AA003, AA290, AA291, AA292 (There are several aspects to the Education Transport budget under different cost codes i.e. Mainstream, SEN, out-of-borough, Primary and Secondary)					
Unsupported borrowing?	N/A					
Other Financial Implications	N/A					

PROCUREMENT ROUTE ABOVE TENDER THRESHOLD (Choose 1(of A, B, C or D) only)	
A. COMPETITIVE PROCUREMENT (complete B if a Framework)	
Procurement Route	N/A
Procurement Justification	N/A
B. FRAMEWORK (Waiver in accordance with Rule 13.1 (c))	
Framework?	Is this a procurement from a Framework? No
Title & Reference of Framework	N/A
Framework Rationale	N/A
C. REQUEST FOR QUOTE FROM RESTRICTED MARKET (Waiver in accordance with Rule 13.1 (d))	
Restricted Market?	Is this a request for quotes from a restricted market? No
Rationale (only permitted below the EU threshold)	N/A
D. SINGLE SOURCE REASON (Waiver in accordance with Rule 13.1 (a, b or d))	
Single Source	Is this Procurement a Single Source – One Quote/Tender (<i>Exceptional circumstances only and select reason below</i>) Yes
Single Source justification below EU Threshold	<i>Select reason and explain your rationale</i> N/A
Single Source justification above EU Threshold	If you are seeking a single tender above the EU threshold – using the “Negotiated Procedure without Prior Publication” route, this is only available in very exceptional circumstances. You must select the reason below and explain your rationale. N/A
Single Source Rationale	The Education Transport Review commenced in October 2017. The review has highlighted an opportunity to scrutinise the current offer of home to School Transport in order to ensure best value and reduce spend as explained in the contract description above. (Add information re EU regs)

PROCUREMENT TIMETABLE, RISK, CONSULTATION AND MANAGEMENT		
Milestones and target dates <i>(Draft)</i>	Key Event	Date
	Publication of Contract Notice or Advert	Click here to enter a date.
	Return of PQQs (omit if not applicable)	Enter estimated or N/A
	Issue of Invitation to Tender	Click here to enter a date.
	Return of Tenders	Click here to enter a date.
	Notification of Results	Click here to enter a date.
	Standstill Period (omit if not applicable)	Enter estimated date range or N/A
	Leaseholder Consultation (omit if not applicable)	Enter estimated date range or N/A
	Expected date of Award	Click here to enter a date.
	Contract Commencement	Click here to enter a date.

Risk Management – Set out Main Risks and Mitigating Actions						
Risk	Likelihood (A – E) ¹	Impact (I – IV) ²	Level of Risk (High to Lower) ³	Potential Negative Impact	Management / Mitigation of Risk	
Tender Process Risks						
Failure to achieve the proposed savings and efficiencies in service delivery within the extension period.	D	!!	High	Proposed service efficiencies are not achieved leaving the service unchanged. Levels of savings are not met	The contract is commissioned in line with the original terms and conditions.	
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	
Click here to enter text.	Click here to enter text.	I	Click here to enter text.	Click here to enter text.	Click here to enter text.	
Contract Performance Management Risks						
Transport provision from new providers fail	D	II	High	Disruption to travel arrangements for some pupils	There is a pool of funding available for ad-hoc 'in-year' admissions that allows for additional contracts to go through a mini-tender process and fill any gaps if this eventuality occurred.	
Contract not appropriately managed	E	III	High	Providers fails to deliver effective contract	Contract management arrangements in place. Team Leader for the Passenger Transport Unit oversees day to day operation of the contracts	
Financial viability of the provider	D	II	High	Provider is unable to operate. Disruption to travel arrangements for some pupils	There is a pool of funding available for ad-hoc 'in-year' admissions that allows for additional contracts to go through a mini-tender process and fill any gaps if this eventuality occurred.	

¹ **Risk Likelihood:** A = Very High, B = High, C = Significant, D = Low, E = Very Low

² **Risk Impact:** I = Critical, II = Significant, III = Marginal, IV = Negligible

³ **Risk Level:** High = AI, BI, All, BII, CI, CII, all others lower

Contingency Arrangements	<p>Should an issue arise that prevents officers from revising the existing process and policy under the existing contract officers would revert to commissioning on the original terms and conditions via the ad-hoc 'in year' funds.</p> <p>With respect to the possibility of provider failure and /or the inability of a provider to continue delivery of their awarded contract, the situation will be dealt with using the ad-hoc 'in year' funds.</p> <p>In the event the Team Leader is unavailable to monitor contracts there are several competent officers within the department able to assume the role of contract monitor. Match the risks</p> <p>.</p>
Consultation	<p>These contracts being considered are all due for renewal, therefore, no formal consultation is required. However, officers organise Operator Forums to facilitate a discussion around the procurement process, it's implications and the opportunities available for both the Council and operators to work collaboratively to improve the delivery of the education transport service. Officers will also work with existing operators to ensure a structured exit plan where required as well as a smooth transition into the process for any new operators.</p> <p>Also, officers will ensure adequate communication throughout the tender process in line with procurement rules.</p> <p>The recommendations of the Education Transport Consultant at the end of the service review may lead officers to make further recommendations to Cabinet for certain changes to the existing policy. Officers would consult with parents, schools, academies and transport operators before embarking on the process required to implement changes to policy. Parents will be advised of any changes to their child's transport arrangements. Parents are advised of their right to raise any issues with the Passenger Transport Unit in respect of their child's transport arrangements. Any issues will be resolved promptly.</p>
Project and Contract Management Proposals	<p>There are established monitoring arrangements in place such as day to day evaluation of provider's performance through direct liaison, performance evaluation strategies and performance management processes to resolve any concerns around performance. During the waiver process officers will work alongside Procurement to ensure compliance. All activity during the period of extension will be carried out in line with the Council's requirements. All documents will be secured in accordance with the Council's Document Retention Policy. Also, all Data Protection and Freedom of Information requests will be dealt with in line with Council policy.</p>
Procurement Comments	<p>Enter comments from Procurement Services</p>

Section C: LEGAL, FINANCE AND PROCUREMENT APPROVAL

Procurement Services	Name	Name
	Signed <i>(Or obtain email of confirmation)</i>	
	Date	Click here to enter a date.
Legal Services <i>(Insofar as it relates to Legal implications)</i>	Name	Name
	Signed <i>(Or obtain email of confirmation)</i>	
	Date	Click here to enter a date.
Finance <i>(Insofar as it relates to Finance implications)</i>	Name	Name
	Signed <i>(Or obtain email of confirmation)</i>	
	Date	Click here to enter a date.

Section D: APPROVAL TO PROCEED VALUE

The Responsible Officer must sign the form, together with the Head of Service as a minimum. Delegated Authority Limits below.

Approval Level	Over £750,000 - Cabinet
-----------------------	-------------------------

Section E: SIGN OFF APPROVAL TO PROCEED

Confirmation by the Responsible Officer of Compliance with Contract Procedure Rules	The Responsible Officer Temi Fawehinmi confirms that the procurement of an extension of Education Transport Contracts for one year from 19 July 2018-18 July 2019 and PS/2017/** has been carried out in accordance with Rule 5 of the Council's Contract Procedure Rules (Chapter 9, Part 2 of the Constitution) and in particular the following duties have been met by the Responsible Officer: <ul style="list-style-type: none"> • Compliance will occur with all regulatory or statutory provisions and the Council's decision making requirements • The Contract will be included on the Council's Contract Register • Value for Money will be achieved • Advice has or will be sought from the Director of Finance and Corporate governance as to an appropriate security bond or guarantee • Document Retention Policy has and will be complied with • Financial Evaluation will be made of all the proposed tenders including the recommended bidder • Advice has been and will be sought and followed from Procurement, Legal and Finance as necessary 	
	Signed	
	Date	Click here to enter a date.
Approval to Proceed	In accordance with the Contract Procedure Rules, I/we confirm the accuracy of the information contained within this form and authorise this request to Proceed to Tender including, where relevant, the permitting of a Waiver from the Contract Procedure Rules in accordance with Rule 13	
Head of Service	Name	Name
	Signed <i>(Or obtain email of confirmation)</i>	
	Date	Click here to enter a date.
Corporate Director <i>I confirm that the Portfolio Holder has been consulted as required</i>	Name	Rory Patterson
	Signed <i>(Or obtain email of confirmation)</i>	
	Date	Click here to enter a date.
Director of Finance and IT <i>If waiver required</i>	Name	Sean Clark
	Signed <i>(Or obtain email of confirmation)</i>	
	Date	Click here to enter a date.
Cabinet	Approval Minute Number	Enter minute reference
	Date	Click here to enter a date.
Now send complete form to Procurement Services signed and scanned (with emails if used)		

10 January 2018	ITEM: 14 Decision 0110456
Cabinet	
Medium Term Financial Strategy Update	
Wards and communities affected: All	Key Decision: Key
Report of: Councillor Shane Hebb, Portfolio Holder for Finance	
Accountable Assistant Director: Sean Clark, Director of Finance and IT	
Accountable Director: Sean Clark, Director of Finance and IT	
This report is public	

Executive Summary

This report presents the latest version of the Medium Term Financial Strategy (MTFS) (appendix 1) and sets out the changes since the last published version considered by Cabinet on 11 October 2017.

At that meeting, Cabinet agreed to endorse an investment approach to close the budget gaps where possible and this was further supported by Full Council on 25 October 2017. This report sets out the progress made from that approach.

In addition to the savings proposals that were set out in the report to Council in February 2017, Service Review proposals are being developed and are summarised in the body of this report. No further savings are being proposed at this time due to the success of the investment approach endorsed by both Cabinet and Council in October 2017.

Transformation Board proposals have been allocated to services and are set out in appendix 2 so as to inform Cabinet of overall changes to Directorate budgets. These are draft and will be updated in future reports as allocations are refined.

In addition, the report sets out the impact of some Minimum Revenue Provision changes that have been agreed with the external auditors.

The Council has a statutory requirement to set a balanced budget annually and to review its adequacy of reserves. This report sets out a balanced budget for 2018/19, an increase to £11m for the General Fund Balance and an additional reserve to support the Council in reducing the net budget over the medium term.

1 Recommendations that Cabinet:

- 1.1 Notes the assumption of a 3% Council Tax increase to provide additional funding towards the cost of Adult Social Care;**
- 1.2 Notes that, in line with previous reports, this report assumes a 1.99% general Council Tax increase but that the local government settlement allows for an increase up to 2.99%;**
- 1.3 Determines how to utilise the expected one off surplus balances in both 2017/18 and 2018/19;**
- 1.4 Endorses the use of the reclassified Minimum Revenue Provision as set out in section 4; and**
- 1.5 Notes this draft budget and ask Corporate Overview and Scrutiny Committee to comment and make recommendations back to Cabinet in February ahead of Full Council.**

2 Introduction and Background

- 2.1 All Members are aware of the financial pressures that all councils have felt in previous years and that all face a challenge to become financially self-sustainable.
- 2.2 The MTFS presented to Cabinet on 11 October 2017 showed pressures of £20.8m between 2018/19 and 2020/21 that, after CSR identified savings, reduced to a net three year pressure of £14.9m. The assumptions have now been updated to reflect current information, including the impact of investment decisions. Key changes include:
 - a) Improved forecasts for investments;
 - b) Assumed income from a second Thurrock Regeneration Ltd scheme;
 - c) A reduction to transformation savings in 2018/19 after an officer challenge process on deliverability and duplication; and
 - d) A reduction in the prudential borrowing impact of financing the new environment fleet set out in section 4.
- 2.3 Council tax assumptions included within the MTFS include:
 - a) A 3% Adult Social Care precept in 2018/19 that is fully passed onto the service; and
 - b) A 1.99% general council tax increase in each of the three years 2018/19 – 2020/21.

- 2.4 The draft Local Government Finance Settlement was announced on 19 December 2017. Key points to note include:
- a) That there are no changes to core grant and business rates assumptions from that previously reported;
 - b) That the council is still waiting on notification of the Education Support and Housing Benefit Administration Grants. These currently total some £1.25m and a 25% reduction has been assumed; and
 - c) That the general council tax increase allowed before a referendum is required has been increased to 2.99% for each of the next two years.
- 2.5 Whilst this report sets out a balanced budget for the next two years, Members need to consider the fact that there is still a significant budget gap in year three and for the following years. It is important to build a sustainable income base for the future from both ongoing investments and the council tax base.
- 2.6 Thurrock Council still has the third lowest council tax amongst all Unitary Authorities and, subsequently, the third lowest budget. Increasing the council tax base is an important element of financial sustainability and spending power figures published by government assumes the full increases.
- 2.7 Whilst it is acknowledged that any increase in household bills is difficult, the impact of an additional 1% to a 2.99% increase is as follows:
- a) The council would raise an additional £620k per annum, an additional £1.25m if the maximum increase was supported for each of the next two years;
 - b) These amounts would add to the surplus position set out in section 3 and be available for one off expenditure; and
 - c) Equates to a maximum weekly increase of 21 pence for over 70% of council properties, less where households are in receipt of Local Council Tax Scheme support.
- 2.8 After the endorsement of the Finance Peer Review, the council continued with the Council Spending Review (CSR) approach that concentrates on meeting the budget pressures through:
- a) Increased income – this can be through fees and charges, the trading of core services and investments from the treasury or property function;
 - b) More or same for less – focussing on better value from contracts and wider procurement, reducing spend on agency staff and more efficient processes; and
 - c) Reducing the growth pressures in demand led services – such as concentrating on early intervention.

- 2.9 This is underpinned by a detailed review of all services and is delivered through a number of officer Boards that ultimately brings proposals through the CSR to Overview and Scrutiny Committees and the Cabinet.
- 2.10 Before considering future years it is important to recognise any impacts from the current year. Cabinet have received two update reports in recent months with the most recent report on 13 December 2017 setting out net pressures of £0.475m. Main areas of concern are within both Children's and Environment Services. To recognise this, £2.5m has been included within the MTFS as growth to meet any ongoing pressures.

3 Draft 2018/19 Budget and Future Forecasts

- 3.1 The MTFS attached at Appendix 1 sets out net pressures before investments of £16.2m. This figure assumes a number of savings from the Transformation Boards that were, in the main, identified during 2016/17 and included within the MTFS presented to Council in February 2017.
- 3.2 In addition, cross cutting service reviews are focused on four key areas for 2018/19 resulting in an target income growth/operating cost saving of £930k:

Service Area	Current Budget	Target Income Growth/Operating Cost Saving	Comments
ICT	£3.9m – central ICT spend	£170k	£20k Income £90k Procurement £60k ICT Structure
Transport	£3.6m (General Fund)	} } } £760k across these three service areas } }	The projects are in discovery phase to determine how the target saving will be achieved against the three areas
Children's Social Care	£28m		
Business Resource	This spend is still being assessed as it is spread across a variety of service areas		

- 3.3 Following the Council meeting on 25 October 2017, officers have been actively following a number of investment opportunities that have not only significantly contributed to the 2018/19 budget but also realised unbudgeted income in 2017/18.

3.4 Along with income from a second Thurrock Regeneration Ltd (TRL) scheme, the summarised budget position for the medium term now stands at:

	2018/19 £m	2019/20 £m	2020/21 £m
MTFS Budget Pressures	5.90	6.21	4.13
Surplus Brought Forward		(2.49)	(0.03)
Known Investments	(7.85)	(3.70)	-
Thurrock Regeneration Ltd	(0.54)	(0.05)	(0.01)
Total	(2.49)	(0.03)	4.09

3.5 As can be seen, supporting an investment approach to accompany the CSR approach has delivered a surplus budget for 2018/19 and 2019/20.

3.6 Points to note:

- The budget surplus in 2018/19 should only be used for one off expenditure and/or as a contribution to reserves. By not committing this surplus to ongoing expenditure the surplus carries forward to 2019/20 and provides a second year balanced budget;
- As previously reported, investments should be a balanced portfolio of cash (loan type) investments and property related. Although the former are sound investments, they are generally short in life and so should complement property related investments that deliver a longer term income streams; and
- Income relating to Thurrock Regeneration Ltd (TRL) currently reflects just one additional scheme.

3.7 This balanced investment approach is required to make further headway into 2020/21 and beyond.

3.8 In addition to the forecast surplus in 2018/19, the investments will deliver unbudgeted income in the current financial year estimated at circa £2m. Again, this can be allocated to one off expenditure and/or a contribution to reserves.

4 Minimum Revenue Provision

4.1 Members will be aware that officers have identified ways of reducing the annual Minimum Revenue Provision (MRP) budget requirements in recent years.

4.2 In recent months, officers have been working on further re-profiling of the MRP requirements that will allow a one off transfer from the council's unusable reserves. This has recently been agreed with the council's external

auditors but the transfer can only be used to support the council's financial sustainability objective.

- 4.3 The sum agreed with the auditors is £13m with the allocation agreed as follows:

Allocated to:	£m
General Fund Balance – the Administration made increasing the General Fund Balance a priority – this will increase the balance from £8m to £11m as at 31 March 2018	3.0
Pay for the new Environment Fleet expenditure in 2017/18 outright instead of through Prudential Borrowing. This reduces ongoing expenditure by circa £0.8m and has been reflected in the attached MTFS	7.5
Earmarked Reserves to meet implementation of Service Review findings and to support further Transformation Projects	2.5
	13.0

5 Issues, Options and Analysis of Options

- 5.1 This report sets out the changes to the current year budget that are proposed for 2018/19. Due to the adoption of an investment approach, the impact on services is limited compared to previous years and allows for significant growth within the Adult's, Children's and Environmental services.
- 5.2 Council tax increases are recommended and, indeed, required to continue towards financial self-sustainability by 2020. The ability to increase the core council tax element by 2.99% is welcomed and would go some way towards achieving financial sustainability in the medium to long term.
- 5.3 The report also sets out surpluses in both the current financial year and 2018/19. Cabinet are asked to consider how these balances should be utilised. It is recommended that they only be used for one off expenditure and/or a contribution as any commitment to ongoing expenditure will increase the budget deficits in future years as the budgets become a core requirement.

6 Reasons for Recommendation

- 6.1 The Council has a statutory requirement to set a balanced budget annually and to review its adequacy of reserves. This report sets out a balanced budget for 2018/19, an increase to £11m for the General Fund Balance and an additional reserve to support the Council in reducing the net budget over the medium term.

7 Consultation (including Overview and Scrutiny, if applicable)

- 7.1 The budget planning governance structure includes involvement and consultation with officers, Portfolio Holders and Members. The process includes the Council Spending Review Panel, made up of cross-party Group Leaders and Deputies who meet regularly during the budget planning period and ahead of key decision points.
- 7.2 The draft budget will be considered by Corporate Overview and Scrutiny Committee on 23 January 2018.

8 Impact on corporate policies, priorities, performance and community impact

- 8.1 The implementation of previous savings proposals has already reduced service delivery levels and our ability to meet statutory requirements, impacting on the community and staff. There is a risk that some agreed savings may result in increased demand for more costly interventions if needs escalate particularly in social care. The potential impact on the Council's ability to safeguard children and adults will be kept carefully under review and mitigating actions taken where required.
- 8.2 There are increases to both the Adults' and Children's budgets and the MTFS also provides additional funding for the Environment Service to meet current pressures and those expected in the future as contracts are renewed.

9 Implications

9.1 Financial

Implications verified by: **Sean Clark**
Director of Finance and IT

Council officers have a legal responsibility to ensure that the Council can contain spend within its available resources. Regular budget monitoring reports will continue to come to Cabinet and be considered by the Directors Board and management teams in order to maintain effective controls on expenditure during this period of enhanced risk. Austerity measures in place are continually reinforced across the Council in order to reduce ancillary spend and to ensure that everyone is aware of the importance and value of every pound of the taxpayers money that is spent by the Council.

This draft budget report sets out a balanced budget for 2018/19 and identifies funding to be used for one off expenditure for the council's priorities.

The ability to increase council tax by 2.99% needs to be carefully considered and should be discussed at both the Corporate Overview and Scrutiny Committee and Cabinet to inform the Council budget setting meeting.

In addition, the report sets out an increase to the General Fund Balance of £3m to £11m and sets aside funding to facilitate additional work towards achieving financial self-sustainability.

9.2 Legal

Implications verified by: **David Lawson**
**Assistant Director of Law & Governance and
Monitoring Officer**

There are no direct legal implications arising from this report.

There are statutory requirements of the Council's Section 151 Officer in relation to setting a balanced budget. The Local Government Finance Act 1988 (Section 114) prescribes that the responsible financial officer "must make a report if he considers that a decision has been made or is about to be made involving expenditure which is unlawful or which, if pursued to its conclusion, would be unlawful and likely to cause a loss or deficiency to the authority". This includes an unbalanced budget.

9.3 Diversity and Equality

Implications verified by: **Natalie Warren**
**Community Development and Equalities
Manager**

There are no specific diversity and equalities implications as part of this report. A comprehensive Community and Equality Impact Assessment (CEIA) will be completed for any specific savings proposals developed and informed by consultation outcomes to feed into final decision making. The cumulative impact will also be closely monitored and reported to Members.

9.4 Other implications (where significant – i.e. Staff, Health, Sustainability, Crime and Disorder)

Any other significant implications will be identified in any individual savings proposal business case to inform the consultation process where applicable and final decision making.

10 Background papers used in preparing the report (including their location on the Council's website or identification whether any are exempt or protected by copyright):

- Budget working papers held in Corporate Finance
- Budget Review Panel papers held in Strategy and Communications

11 Appendices to the report

- Appendix 1 – Medium Term Financial Strategy

- Appendix 2 – Summary of CSR Savings
- Appendix 3 – Draft allocation of growth and savings to services

Report Authors:

Sean Clark

Director of Finance and IT

MEDIUM TERM FINANCIAL STRATEGY

Narrative	2018/19	2019/20	2020/21
	£000	£000	£000
Local Funding			
Council Tax Base / Charge	(1,898)	(1,966)	(2,025)
Council Tax Social Care Precept	(1,869)	0	0
Council Tax Collection Fund Surplus	558	0	0
	(3,209)	(1,966)	(2,025)
Business Rates Growth	(933)	(378)	(658)
Business Rates - Collection Fund Deficit	(1,773)	0	0
	(2,706)	(378)	(658)
Total Government Resources			
Revenue Support Grant	3,962	4,000	658
Transfer to funding formula under 100% retention	0	0	0
New Homes Bonus	673	122	0
Other Central Grants - ESG & HB and Ctax Admin Subsidy	375	300	300
	5,010	4,422	958
Net Additional (Reduction) in resources	(904)	2,079	(1,726)
Inflation and other general increases			
Pay award at 2%, Increments and legislative changes	2,181	2,098	2,098
Waste contract inflation	403	371	389
Non Contract Inflation - Utilities and Fuel and Oil	100	100	100
Levy adjustment	45	54	0
	2,729	2,623	2,587
Demographic, Economic and Capital Growth:			
Adult Social Care Demand linked to ASC precept	1,869	0	0
Contingency to Meet Growth Pressures	4,802	3,740	2,500
	6,671	3,740	4,164
Services Design Principals and Strategic Boards			
Procurement Total	(70)	(105)	0
Commercial Total	(572)	(371)	(100)
Customer & Demand Management Total	(100)	0	0
Digital Total	(207)	(130)	0
People Total	(500)	(500)	0
Property Total	(275)	(200)	0
Service Reviews	(870)	(920)	(800)
	(2,594)	(2,226)	(900)
Total Savings to Identify	5,902	6,215	4,126
C/f Position		(2,488)	(26)
Cash Investments	0	0	0
Thurrock regeneration ltd loan arrangements - Belmont Only	(540)	(53)	(14)
Other known property related investments	0	0	0
Known Investments	(7,850)	(3,700)	0
	(8,390)	(3,753)	(14)
Working Totals	(2,488)	(26)	4,086

SAVINGS BY CSR BOARD

Board	Proposal	2018/19	2019/20	2020/21
Procurement	Savings to be delivered through effective procurement and contract management	70	105	-
Commercial	Further income through the expansion and development of traded services	302	271	-
Commercial	Growth in fees and charges income reflecting 17/18 forecasts and review of fees and charges, mainly through volume increases as a direct result of service areas understanding and acting upon market and competitor information	270	100	100
Customer & Demand Management	Customer Services Strategy	100	-	-
ICT / Digital	Citizen Journeys - "Enabling citizens and customers to do business with the council digitally"	37	90	-
ICT / Digital	Legacy Application Rationalisation and Unified Comms	110	40	-
People	Savings to be delivered through ongoing review of employee related costs including reducing use of high cost agency staff, effective attendance management and reviewing overtime arrangements	500	500	-
Property	Rental income stretch target - annual increase in rent roll through lease reviews and renewals	200	200	-
Property	Corporate Landlord model - reduction in running costs through economies of scale	75	-	-
Service Review	Service Review savings to be identified through ongoing review process	930	920	800
		2,594	2,226	900

Indicative Service Budget Impact 2018/19

Directorate	Service	2017/18 Net Current Budget (September 2017)	2017/18 Carryforward adjustment £000	MTFS Change in Resources 2018/19 £000	MTFS Growth, Inflation & Other Increases 2018/19	Baseline Budget 2018/19 £000	Commercial Savings £000	Customer & Demand Management Savings £000	ICT/Digital Savings £000	People Savings £000	Procurement Savings £000	Property Savings £000	Service Review Savings £000	Total Savings £000	Indicative Budget 2018/19 £000
Environment and Highways	Environment	16,342			440	16,782	(106)			(90)				(196)	16,586
	Transportation & Highways	6,189	(52)		19	6,156				(7)				(7)	6,149
	Environment and Highways Total	22,531	(52)	0	459	22,938	(106)	0	0	(97)	0	0	0	(203)	22,735
Place	Planning & Growth	2,998				2,998	(10)			(22)				(32)	2,966
	Regeneration	720				720	(95)			(4)				(99)	621
	Assets	1,659			25	1,684				(6)		(275)		(281)	1,403
	Place Total	5,377	0	0	25	5,402	(105)	0	0	(32)	0	(275)	0	(412)	4,990
Children's Services	Care & Targeted Outcomes	28,018	(15)		1	28,004	(17)			(178)	(10)			(205)	27,799
	Central Administration Support and Other	1,357	(193)			1,164				(9)				(9)	1,155
	Learning & Universal Outcomes	6,616	(89)		4	6,531	(58)			(19)				(77)	6,454
	School Transport	805				805					(55)			(55)	750
	Children's Services Total	36,796	(297)	0	5	36,504	(75)	0	0	(206)	(65)	0	0	(346)	36,158
Adults; Housing and Health	External Placements	21,824			1,869	23,693	(7)				(100)			(107)	23,586
	Provider Services	9,625	(39)		3	9,589	(1)			(94)				(95)	9,494
	External Commissioning	1,914				1,914	(2)			(2)				(4)	1,910
	Public Health	424	(424)			0								0	0
	Community Development & Libraries	1,834	(212)		1	1,623				(6)				(6)	1,617
	Adults; Housing and Health Total	35,621	(675)	0	1,873	36,819	(10)	0	0	(102)	(100)	0	0	(212)	36,607
Housing General Fund	Homelessness	479				479				(5)				(5)	474
	Private Sector Housing	1,775				1,775				(2)				(2)	1,773
	Travellers	(75)			4	(71)	(46)							(46)	(117)
	Housing General Fund Total	2,179	0	0	4	2,183	(46)	0	0	(7)	0	0	0	(53)	2,130
Finance and Information Technology	Corporate Finance	1,950				1,950	(190)			(9)				(199)	1,751
	Cashiers	70				70								0	70
	Chief Executive	197				197				(1)				(1)	196
	ICT	3,883				3,883			(110)	(11)				(121)	3,762
	Revenue and Benefits	1,718				1,718			(12)	(5)	(5)			(22)	1,696
	Democratic Services	190				190				(1)				(1)	189
	Members Services	722				722								0	722
	Electoral Services	440				440								0	440
	Finance and Information Technology Total	9,170	0	0	0	9,170	(190)	0	(122)	(27)	(5)	0	0	(344)	8,826
HR; OD and Transformation	HR & OD	4,466	(7)			4,459				(6)				(6)	4,453
	HR; OD and Transformation Total	4,466	(7)	0	0	4,459	0	0	0	(6)	0	0	0	(6)	4,453
Strategy, Communications and Customer Services	Corporate Strategy & Communications	1,693				1,693	(20)	(100)	(25)	(6)				(151)	1,542
	Social Care Performance	898				898	(20)			(2)				(22)	876
	Strategy, Communications and Customer Services Total	2,591	0	0	0	2,591	(40)	(100)	(25)	(8)	0	0	0	(173)	2,418
Legal	Legal Services	857				857				(11)				(11)	846
	Legal Total	857	0	0	0	857	0	0	0	(11)	0	0	0	(11)	846
Commercial Services	Commercial Services	561				561				(3)	100			97	658
	Commercial Services Total	561	0	0	0	561	0	0	0	(3)	100	0	0	97	658
Central Expenses	Corporate Finance	(6,438)	1,031		7,034	1,627								0	1,627
	Savings to be Allocated	0				0							(930)	(930)	(930)
	Central Expenses Total	(6,438)	1,031	0	7,034	1,627	0	0	0	0	0	0	(930)	(930)	697
Revenue Funding	Council Tax Income	(62,240)		(3,209)		(65,449)								0	(65,449)
	Grant Income	(4,103)		1,048		(3,055)								0	(3,055)
	NNDR Income	(32,708)		(2,706)		(35,414)								0	(35,414)
	Revenue Support Grant	(14,660)		3,962		(10,698)								0	(10,698)
	Revenue Funding Total	(113,711)	0	(904)	0	(114,615)	0	0	0	0	0	0	0	0	(114,615)
	Grand Total	0	0	(904)	9,400	8,496	(572)	(100)	(147)	(500)	(70)	(275)	(930)	(2,594)	5,902

10 January 2018	ITEM: 15 Decision 0110457
Cabinet	
Lower Thames Crossing Task Force Update Report	
Wards and communities affected: All	Key Decision: Key
Report of: Councillor Peter Smith, Chair of the Lower Thames Crossing Task Force	
Accountable Assistant Director: John Lamb, Interim Assistant Director Lower Thames Crossing	
Accountable Director: Steve Cox, Corporate Director of Place	
This report is public	

Executive Summary

In line with the Terms of Reference, the Lower Thames Crossing (LTC) Taskforce is required to report to Cabinet on its work.

1. Recommendation(s)

1.1 That Cabinet notes the work of the taskforce

2. Introduction and Background

2.1 The Lower Thames Crossing Taskforce has met monthly since September 2017.

2.2 The cross party taskforce includes representatives from the local community including businesses and local residents. The Thames Crossing Action Group also has a representative to ensure the task force is as inclusive as possible.

2.3 In line with the Constitution the Task Force elected Councillor Peter Smith as Chair and Councillor Gerard Rice as Vice-Chair.

2.4 The Council remains opposed to any new Crossings in Thurrock and the Task Force has consistently sought to hold Highways England (HE) to account. A recurring theme has been the delay in obtaining responses and in some respect many questions continue to be unanswered.

- 2.5 As a Nationally Significant Infrastructure Project within the Government's 'National Policy Statement for National Network' Project the proposed crossing will be considered by the Planning Inspectorate (PINS). Highways England has produced a 'Scoping Report' on what will eventually be included in HE's 'Environmental Impact Assessment' and this was sent by PINS to statutory bodies.
- 2.6 Thurrock Council received this on the 2nd November and subsequently responded on the 30th November. A copy of the Thurrock response is detailed in Appendix 1. The Scoping Report has been a substantive agenda item at the November and December meetings.
- 2.7 The main areas of challenge on their proposals since the first meeting in September have been set out below. The approach has included HE being invited to comment and answer questions, after which they then leave.

3. Substantive Items discussed within the Task Force

- 3.1 All LTC Taskforce sessions are audio recorded and available on the Thurrock website. The full minutes are attached in appendix 2.

The substantive discussion points have included:

- The purpose and structure of an Environmental Impact Assessment (EIA)
 - The Council's response to the EIA Scoping Report
 - The choice of this route as the preferred route and changes to the 'red line'
 - Environmental Impacts especially air quality and noise
 - The health impacts of the proposal on Thurrock residents
 - The method of consultation and engagement that Highways England has adopted
- 3.2 A list of actions for Highways England has been developed and this is attached as Appendix 3. It is notable that HE continues to be pressed for updates.
- 3.3 It is expected that each month there will be a deeper review of key specialist topics and Air Quality has featured as one example at the December meeting.
- 3.4 The resource implications of establishing the Task Force can be contained within the constraints of existing funding for 2017/18. In due course both the LTC project and the Task Force will need to consider in detail a range of highly specialist information in responding to Highways England. This will include detailed appraisal

of traffic impacts, health impacts, socio-economic changes and wider physical impacts of such a major development.

- 3.5 At the December Task Force meeting it was agreed that Task Force members would provide a list of specific issues relating to the scheme that they would like collated and submitted to Highways England for HE to address at the next Task Force meeting on 22 January.

4. Reasons for Recommendation

- 4.1 In line with the terms of reference the LTC Taskforce will update Cabinet.

5. Consultation (including Overview and Scrutiny, if applicable)

- 5.1 Lower Thames Crossing Task Force.

6. Impact on corporate policies, priorities, performance and community impact

- 6.1 None

7. Implications

7.1 Financial

Implications verified by: **Sean Clark**
Director of Finance and IT

The Council currently budgets £50,000 per annum towards work on the Lower Thames Crossing. As the work of this Task Force develops, it is clear that additional funding will be required although, at this time, the level of additional funding has not yet been determined.

7.2 Legal

Implications verified by: **David Lawson**
**Assistant Director of Law & Governance and
Monitoring Officer**

None arising directly from this update report

7.3 **Diversity and Equality**

Implications verified by: **Natalie Warren**
**Community Development & Equalities
Manager**

None arising directly from this update report.

7.4 **Other implications** (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder)

None

8. **Background papers used in preparing the report** (including their location on the Council's website or identification whether any are exempt or protected by copyright):

- None

9. **Appendices to the report**

- Appendix 1 – Thurrock Councils Scoping report response letter
- Appendix 2 – LTC Task Force Minutes
- Appendix 3 – Action List for Highways England.

Report Author:

John Lamb

Interim Assistant Director Lower Thames Crossing

Gail Boyle
Senior EIA and Land Rights
3D Eagle Wing
Temple Quay House
2 The Square
Bristol, BS1 6PN

Your Ref: TR010032-000007

Dear Gail

Re: Planning Act 2008 (as amended) and The Infrastructure Planning (Environmental Impact Assessment) Regulations 2017 (the EIA Regulations) – Regulations 10 and 11

Proposed application by Highways England for an Order granting Development Consent for the Lower Thames Crossing

I refer to your letter dated 2nd November 2017 regarding the above matter and to your request that the local planning authority (LPA):

- inform the Planning Inspectorate of the information we consider should be provided in the Environmental Statement (ES); or
- confirm we do not have any comments.

Thurrock Council is a unitary authority in South Essex representing over 165,000 residents and is the recipient of nearly two thirds of the proposed development. The Council therefore have a number of comments in relation to the Highways England Lower Thames Crossing Environmental Impact Assessment (EIA) Scoping Report dated October 2017. The Council's full response has been provided within a Schedule of Comments/Observations in Appendix 1 of this letter.

The following sections of this letter highlight the Council's key comments and/or concerns. However, it should be noted that these sections are solely a snapshot of the full response, and therefore it is important that the detailed comments given in Appendix 1 are taken into consideration. Moreover Highways England should also give regard to local policies to align with Thurrock's Local Plan.

- 1) In summary, Thurrock Council has not been given sufficient material from Highways England to allow the Council to determine how this scheme meets their declared objectives, nor the respective balance of priorities that resulted in the choice of crossing and chosen road alignment. Reflecting the scale and significance of this national project, a full and comprehensive understanding of the transport and land use implications is required. A robust and comprehensive analysis should be undertaken and presented within a standalone chapter within the ES. This would provide an understanding of

business case around choice of location and that proposals demonstrate the potential to unlock housing growth.

- 2) Thurrock Council has for a number of years stated that the need for a new crossing requires further evidence. Further work is required to explore alternative modes of travel. Therefore, it must be demonstrated how the need for providing or safeguarding additional capacity (passenger and freight) as part of the decision-making process has been considered in terms of alternative options. This must underpin assessment of the need for the crossing and choices around the need for two or three lanes of new motorway alongside appropriate improvements to local roads to bus services and rail networks. A thorough analysis of appropriate and acceptable options is required to evidence how proposals comply with Government Guidance to support sustainable travel and land use integration. A detailed and stand-alone analysis would reduce the significant risk in solely catering for road traffic to the exclusion of wider enhancements to transport and mobility that would better meet the wider Essex and Kent communities.
- 3) The environmental harm caused by the scheme has not been fully assessed, quantified or demonstrated as part of the announcement of the preferred route. This in turn has impacted this scoping report. This includes the impacts on health and local amenity, which may not be outweighed by any economic or transport benefits - clearly further work is required on air quality and public health before the Government makes a decision. It must be given weight alongside economic and transport benefits. The World Health Organisation has stated that there is no safe level for particulate matter given its carcinogenic properties. Despite considerable recognition [\[click\]](#) by DEFRA and Public Health England – with the Local Government Association; as Public bodies we are not demonstrating to our public how we are taking seriously the health risk associated with vehicle emissions. New analysis and added priority must now be given within the ES to PM_{2.5} particulate matter.
- 4) The Scoping Report does not acknowledge all of the concerns the Council faces in terms of the health and wellbeing of the communities we represent. Without clear evidence to the contrary, the Council is very concerned that life outcomes may be further impacted by the proposed crossing. This is particularly in relation to the variation experienced across the borough in terms of life expectancy, incidence of and premature mortality from cancer, hospitals admissions and premature mortality due to cardiovascular disease and respiratory illnesses. Therefore, the Council strongly request that a separate Health Impact Assessment is undertaken, the methodology of which should be agreed with the Director of Public Health in the Council and in liaison with all other impacted authorities' Directors of Public Health and Public Health England. This will ensure that

any negative consequences of the development are identified and mitigated, and that opportunities for improving the well-being of the community are maximised. Appendix 2 of this letter provides a full justification for the reasoning behind why a separate Health Impact Assessment should be undertaken for the project from a Thurrock perspective. The Council has also noted that precedents have been set by several Nationally Significant Infrastructure Projects (NSIPs), such as the Silvertown Tunnel in London and the A14 in Cambridgeshire, which completed Health Impact Assessments as part of their applications.

Key General Comments:

- 5) The initial chapters reflect the current existing knowledge of the proposed project. The proposed scheme is continuing to evolve, and therefore it is essential the Council understand the reasoning for changes, and is genuinely consulted on changes to the Scheme design. Highways England should also give the Council the opportunity to inform the ongoing changes to the project design. Significant changes are being made by Highways England to the current preferred route that are in advance of any robust published traffic model, and therefore this appears to be occurring without a clear foundation i.e. it is unclear how Highways England are arriving at the decision for Route 3 as opposed to Route 4, and in turn how they are making significant changes to Route 3, in advance of an approved traffic model. This leads to significant concerns over the validity and robustness of their preferred route.
- 6) The wider impact on Thurrock's socio-economic mix has not been considered, for example the effect on housing delivery and how a Lower Thames Crossing will impact on future growth and investment. The existing and emerging Thurrock Local Plan sets out the basis on which growth is planned, to balance the opportunities of growth in homes and jobs. As the new Local Plan is progressed, the Council requests that an additional and standalone socio-economic study is undertaken to assess in detail the impact the Lower Thames Crossing would have on the Borough. This should also take into consideration the wider economic benefits/dis-benefits.
- 7) The Council has major concerns regarding the proposed junction with the A13 and the A1089. This is likely to be significantly elevated, which would be very prominent in the landscape. The elevation in combination with the complex arrangement is also likely to cause adverse visual effects, worsen air quality and increase noise levels significantly. As noted in the Cultural Heritage section below, the junction is also located on a nationally significant Scheduled Monument, and therefore the construction of this junction would have direct effects on (through the removal of) the scheduled monument. The significant adverse effects caused by this junction will need considerable mitigation e.g. tunnelling to ensure the effects are reduced and the introduction of the junction is acceptable.

In addition to the strategic routing model for traffic across the region, we expect Highways England to undertake a detailed micro simulation of this new junction and the local road network, to prove that the full impacts have been understood, and that it represents a workable solution compared to all other alternatives.

- 8) The Council would like to better understand Highways England consideration for a new direct spur into Tilbury, and the respective role of the current A1089. This new spur would re-route all of the Port of Tilbury traffic south of the town rather than through the town on the A1089. This new spur that Highways England have now included in their proposal, would introduce new residential receptors to air quality issues and expose new parts of the town to noise. This fails to recognise the ambition of the Council to better link Tilbury with the river. In addition to the strategic routing model, we expect Highways England to undertake a detailed micro simulation of the proposed road changes, to understand the impact on the local road network and the implication of changes to the local roads following any de-trunking.
- 9) It is a requirement of the new EIA regulations (Infrastructure Planning (Environmental Impact Assessment) Regulations 2017) to assess 'the expected significant effects arising from the vulnerability of the proposed development to major accidents or disasters that are relevant to the development'. Therefore, under these new regulations Highways England should undertake sensitivity testing to assess unusual but not uncommon traffic scenarios due to major accidents, e.g. the closure of both crossings, and the impact this would have on traffic/transport, noise, air quality, people, and communities. This assessment should be presented within the ES, and must recognise the impact of closures to the crossing on the jobs and livelihoods across the borough.
- 10) The Scoping Report does not fully justify the reason Location C was chosen as the preferred route. The reasons provided focus on the Scheme objectives and cost, and do not take into consideration the effects on the environment / communities / Thurrock's Strategic Growth Plans. The Council requests that full justification regarding the preferred route selection, which includes outlining a comparison of the environmental effects of each option to reach the decision on the preferred route, is provided in the ES.
- 11) The report mentions opportunities to deliver environmental enhancements, however there is no explicit mention of any enhancements that have been identified. Highways England need to consider and identify opportunities for enhancements throughout the duration of the design process, and include these in the ES. Opportunities should consider (but should not be limited to) enhancements to the existing public rights of way network, in line with Thurrock Rights of Way Improvement Plan (which is currently

in draft form), and enhancements to the landscape and air quality. Highways England need to demonstrate through their design principles how the earthworks and subsequent landscaping and planting will provide a new corridor for wildlife, and with it, a new route for non-motorised travel that brings together new and existing rights of way. Aside from direct opportunities through careful scheme design to build in future new connections, the Council also advises Highways England to utilise their Environment and Air Quality Designated Funds to ensure that environmental enhancements are delivered across the widest possible network of rights of way, in order to maximise local opportunities for reduced car travel; at least to the extent that it balances the increase in total traffic mileage generated by the new crossing and the new motorway.

- 12) The report states that the Lower Thames Crossing north of the Thames will be at grade or on embankments, however though the Kent section it will be in a deep cutting which is likely to lessen its visual effects. The reasoning for this will need to be clearly presented and fully justified. To assess the landscape and visual effects, Highways England needs to provide plans showing which sections would be on embankments and which at grade. The Council would also like to see 3D visualisations for the Scheme.
- 13) The redline boundary only takes account of the road area itself and does not consider the space that will be required for attenuation storage and flood zone compensation. It is critical to consider this as early as possible to ensure the Council do not have any space issues further down the line.
- 14) The Council has key concerns regarding the adverse visual, noise and air quality effects that are likely to result from the Lower Thames Crossing. The Council therefore believes that Highways England should evidence how and why it has chosen not to provide tunnelling beneath Thurrock, as this would alleviate these effects.
- 15) Due to the scale of the project, Highways England needs to demonstrate impacts through a thorough and comprehensive construction impact assessment, and include appropriate mitigation, for the project. The method of boring the tunnels has already been suggested as being from Thurrock southwards under the Thames. This creates air quality and noise implications. In addition, the majority of the new motorway is within Thurrock and this exposes residents to significant noise and air quality issues. Highways England has not demonstrated why this cannot be built from South to North.
- 16) Thurrock has been very successful in growing jobs within the Borough, and there is a continued need to accelerate housing delivery. Highways England need to demonstrate through a detailed standalone study how housing opportunities might in future be impacted by the adverse impacts of this new motorway i.e. noise, pollution and visual impact. The LTC could

further exacerbate negative perceptions of the Borough as a place to live, thereby harming the delivery of homes and, as a result, stifling economic growth.

Key Topic Specific Comments:

- **Air Quality** - The Council recommends that additional baseline air quality monitoring is established at sensitive receptors along the new proposed link road to Tilbury, just off the A1013 along Heath Road, and along Baker Street, including Baker St/ Heath Road at A13/A1089 junction. Additionally, as of November 2017 the Council, in response to the proposed crossing, has set up its own additional NO₂ diffusion tube monitoring sites in key locations. The data from these should be included within Highways England's air quality assessment for establishing a baseline and for model verification. Please see the Schedule of Comments/Observations in Appendix 1 for the location of these additional monitoring sites.
- **Air Quality** - PM_{2.5} needs to be considered within the air quality assessment. The evaluation of significance of this pollutant should also be assessed, particularly as it is the very fine elements of particulate matter (i.e. PM_{2.5}), such as brake and tyre wear emissions and diesel exhaust emissions that contribute to the bulk of PM_{2.5} emissions and it is this element which is most prejudicial to health.
- **Cultural Heritage** - Consideration needs to be given in the EIA for the appropriate recording of the scheduled monument (Crop mark complex, Orsett) at the junction with the A13 and A1089 considering the extensive damage that will be caused. Consideration needs to be given to undertaking a total excavation of the scheduled area and associated elements of this nationally important complex.
- **Cultural Heritage** - Tilbury and Coalhouse Forts as combined monuments, forming defensive structures along the Thames, should be considered as Very High Value receptors. This should be discussed with Historic England.
- **Landscape** - The Landscape and Visual Impact Assessment should have regard to the new (currently draft) "Landscape Character Assessment for Thurrock" and the "Land of the Fanns Character Assessment" which covers a large proportion of the affected landscape north of the Thames. The Land of the Fanns is a Heritage Lottery Fund Landscape Partnership scheme which should be considered as part of any landscape, ecology and cultural heritage assessment.
- **Landscape** - The Scoping Report provides no justification for the decision to adopt a 2km Zone of Visual Influence (ZVI) for the landscape and visual impact assessment. This should follow standard best practice and identify a ZVI which is likely to be much larger. This is particularly important for the land to the north of the A13, which is much more open. It is likely that the route (which is likely to be elevated through this area) would be very prominent from a long distance e.g. from Thorndon Country Park in

Brentwood.

- **Landscape** - No methodology has been outlined for the production of the photomontages. These should be produced for year 1 and year 15, to show the future visual impact of the proposal. These should be produced for key views such as the proposed tunnel, the A13 and Tilbury junctions, the Tilbury loop railway and where the route crosses through the Mardyke Valley.
- **Landscape** - Highways England will need to agree any proposed viewpoint receptors with the Council, in advance of the assessment commencing. These will need to ensure that all settlements are assessed, as well as sites used for public recreation, cultural heritage assets, public rights of way and existing transport routes. Long views will also need to be assessed e.g. from Thorndon Park in Brentwood. Some future baseline viewpoints will also need to be considered.
- **Landscape** – Highways England suggest the construction of the tunnel under the Thames is likely to be from north or south. The basis for this assertion is unknown and Highways England need to set out why this is the case. This would result in large areas of land east of the power station site being set aside for construction purposes. This is adjacent to the Two Forts Way recreational route. The material extracted during the tunnel construction is likely to be stored in this area, which will have adverse visual effects for at least six years. The ES will need to take into consideration the maximum proposed heights of stored materials plus heights of machines etc. being used during the construction. It is also proposed that a substation will be required in this area. Again, the ES will need to take the size of this into consideration. The Council would like to see the heights of the stockpiles, machinery, and substation. The final restoration of this area will need to demonstrate landscape and ecological benefits with no spoil left in this area over the long term e.g. restoring the land immediately west of Coalhouse Fort as coastal grazing grass or wetland.
- **Landscape and Biodiversity** - The report recognises that the scheme would have a direct effect on the Orsett Fen Open Access Area. Highways England need to ensure that there is connectivity, and consider mitigation measures for landscape, ecology and water management that can be integrated to ensure that the historic fenland habitat can be recreated.
- **Biodiversity** - The report details a comprehensive list of protected species that are being surveyed. However, there is no mention of barn owls. Barn owls should be considered and surveys undertaken (if required), as barn owls have the potential to be impacted within a buffer zone of up to 1.5km from new roads.
- **Geology and Soils** – Highways England need to demonstrate that particular regard is given to the potential contamination at the former Goshems Farm landfill (THU0048) where the tunnel portal would be located. The Ground Investigation will need to fully determine the level of contamination present here.

- **Materials** - No methodology has been outlined for the materials assessment. The methodology needs to be fully defined within the ES to ensure full understanding of how the conclusions are reached. Consideration should be given to the calculation of the embodied carbon emissions of the materials required to construct the Scheme, as a good benchmark for comparison against other similar road schemes.
- **Noise and Vibration** - Highways England need to agree the locations of the noise surveys with the Council, although the indicative noise monitoring locations outlined in the Scoping Report are generally in satisfactory locations. The Council would recommend a long-term monitor is set up in Baker Street, as this would be closest to the proposed southbound road to the A13 eastbound slip. Further monitoring may also be necessary in the south of Tilbury where the link could be preferentially used by the existing Tilbury port traffic rather than the A1089 dock access road.
- **People and Communities** - The people and communities assessment should also consider Coalhouse Fort within the community facilities assessment, the amenity of people living and working in the area and using established leisure facilities such as parks, and severance in the context of dividing the borough and creating two separate sets of communities.
- **People and Communities** - Highways England need to clarify how the impacts on public rights of way will be mitigated. The use of green bridges and underpasses to replace any public rights of way that are permanently affected by the development would be beneficial. Highways England should also take into consideration Thurrock's Public Rights of Way Improvement Plan (which is currently in draft form).
- **Climate** - Embodied carbon from the use of materials within the construction needs to be considered within the climate assessment, as this makes up approx. 70-80% of the construction carbon footprint. Greenhouse gas emissions from the increased volume of traffic also needs to be considered within the operational assessment for climate.
- **Cumulative Effects** - Tilbury Energy Centre needs to be included within the assessment of cumulative effects (as well as Tilbury2). In addition, although DP World London Gateway has been developed, the capacity at this site will continue to increase. Therefore, the cumulative assessment within the ES should also take this into consideration; this is particularly important within the noise and air quality cumulative assessments.

Proposed Structure of the ES

The proposed structure and content of the ES is set out in Chapter 17 of the Scoping Report. However, it is noted that the structure of the topic specific chapters includes a 'Regulatory Framework/NPSNN requirements' section. However, Highways England should also give regard to local policies, to align with Thurrock's Local Plan.

Additionally, as noted previously, the Council does not believe that the topics listed (for inclusion within the ES) will enable a thorough and comprehensive assessment on health and wellbeing and on the local economy. Therefore, the Council requests that the following key areas must form distinct and standalone part of the Development Consent Order Application

- a standalone Health Impact Assessment
- a standalone Socio-Economic Study
- a standalone assessment of Transportation and Land use
- a standalone multimodal assessment
- a standalone assessment of the construction impacts

Summary

I trust that the comments and enclosures are of assistance. Again, I would like to reiterate that the information outlined in this letter solely highlights the key comments/concerns the Council has. Please refer to the Schedule of Comments/Observations contained in Appendix 1 of this letter, for the full detailed response from the Council.

Thank you for this opportunity to comment on the EIA Scoping Report. If you need any further assistance or wish to discuss any matters arising, please feel free to contact me.

Yours
sincerely,



Steve Cox
Corporate Director, Place

APPENDIX 1 – Schedule of Comments/Observations on the Lower Thames Crossing Environmental Impact Assessment Scoping Report

APPENDIX 2 – Justification for a full Health Impact Assessment

Minutes of the Meeting of the Lower Thames Crossing Task Force held on 16 October 2017 at 6.00 pm

Present: Councillors Peter Smith (Chair), John Allen, Roy Jones, Steve Liddiard, Brian Little, Bukky Okunade, Terry Piccolo, Gerard Rice and Colin Churchman (Substitute)

Matt Jackson, Thames Crossing Action Group Representative
Peter Ward, Thurrock Business Representative

Apologies: Councillor Tom Kelly

In attendance: Steve Cox, Corporate Director of Environment and Place
Ann Osola, Assistant Director Highways & Transportation
Ian Wake, Director of Public Health
Dr Kim Yates, Independent Technical Advisor on Environmental Issues
Charlotte Raper, Democratic Services Officer

Before the start of the Meeting, all present were advised that the meeting may be filmed and was being recorded, with the audio recording to be made available on the Council's website.

10. Minutes

The minutes of the Lower Thames Crossing Task Force meeting held on 25 September 2017 were approved as a correct record.

11. Items of Urgent Business

There were no items of urgent business.

12. Declaration of Interests

Councillor Jones felt that all Members had an interest, in that they were representing their communities and the Lower Thames Crossing would have an enormous impact on all of Thurrock.

13. Election of Vice-Chair

As Councillor B. Rice had stepped down from the Task Force it was necessary to elect a new Vice-chair.

Councillor Liddiard nominated Councillor G. Rice, and this was seconded by Councillor Jones. There were no other nominations and therefore Councillor G. Rice was declared Vice-Chair.

14. Terms of Reference

The Chair asked whether any suggestions for amendments had been received by the Democratic Services Officer. It was confirmed the only request had been for clarification around substitutes, which was in progress with group leaders.

The Task Force agreed to continue with the existing Terms of Reference.

15. Highways England Update

The representatives from Highways England gave a presentation which outlined the process for surveys, including the varying types and explained why they were undertaken.

The Chair noted that residents had complained of noise in Gravesham and asked if the ground surveys were responsible. It was confirmed that ground surveys were currently underway and since the site was a fully active rifle range used by the Met Police it was only possible to carry out the works on weekends.

Councillor Jones stated that much of the land within the proposed route was farmland with good soil for crops. He queried what purpose the soil sampling served and what the outcome would be if the tests confirmed the land was ideal for farming; would the recommendation be to leave the land for its current purpose? Highways England would collect soil samples to form the baseline for their data which would be reported to the Secretary of State, who was responsible for assessing the scheme.

Councillor B. Little reiterated the point that the Council was against any further crossings within Thurrock. He added that the scheme should not simply rectify its own impact but improve the current situation in Thurrock.

The Vice-Chair understood the need for weekend works on the current site in Gravesham, but urged Highways England to reassure the people of Thurrock that works would be based on weekdays wherever possible, to limit the impact on residents' free time. The timetable for works was still in development; however the point was noted by Highways England.

The Thames Crossing Action Group Representative highlighted the poor air quality in Thurrock was well-documented. He sought clarification from Highways England as to how it would be possible to mitigate against air pollution on open air roads. Air Quality monitoring and traffic modelling would be undertaken to identify any expected impact, the areas covered would be wider than those monitored by the Council but the data would be comparable.

The Independent Technical Advisor on Environmental Issues asked whether noise monitoring would be spot checks or long-term data collection, and whether the Council could have input into the process. The details were still being discussed and the process would not commence until Spring 2018, but

Thurrock could express its views in the response to the Environmental Impact Assessment (EIA) Scoping Report. The Independent Technical Advisor on Environmental also noted that ecology surveys were subject to time constraints and sought reassurance that it was all in hand. Ecology surveys required two years' worth of data and therefore they had been progressed earlier. All others had been well timetabled.

The Director of Public Health questioned the procedure if landholders refused consent for access for surveys. He also asked where the data results would be published and what type of result might impact upon the route choice. It was always the preferred procedure that consent was obtained from landowners; however under S53 of the Planning Act 2008 Highways England had certain powers if that consent was withheld. The results would be published as the Environmental Impact Assessment however could be shared with Thurrock Council in the interim. Ground conditions or particular species could impact upon the route; however there were no specific examples to illustrate the point.

The Vice-Chair asked for clarification around the scheme design, such as the possibility of 'cut and cover' or tunnels. He felt the proposal to have sections of the route elevated to 5-8m would hardly be conducive to minimise the impact on residents. He also noted ambiguity as to whether there would be four or six lanes and requested that Highways England confirm these details. The representatives present were responsible for surveys and the EIA Scoping Report therefore did not have the requested information but it would be fed back outside of the meeting.

The Thurrock Business Representative queried when the EIA Scoping Report would be issued and it was confirmed that Highways England would send to the Planning Inspectorate at the end of October.

Councillor Jones stressed that the proposed route cut through Green Belt and agricultural land, as well as habitat for wildlife and asked why this was the favoured route, as he felt it would cause devastation for Thurrock. Highways England had provided a series of documents outlining the decision process during the options phase but these could be circulated to Members outside of the meeting.

Councillor Allen asked both the Director of Public Health and the representatives from Highways England what impact they felt the Lower Thames Crossing would have on air quality and the health and wellbeing of those in close proximity to the route and the surrounding areas.

The Director of Public Health outlined that the health effects of poor air quality were well documented. About 50% of the air pollution in the borough stemmed from London and was simply in the atmosphere, so Thurrock suffered from 'background' air pollution. The Dartford Crossing and proximity to the M25 only made matters worse. There were serious issues with respiratory disease and a negative impact on cardio vascular diseases. Noise

and air pollution were also known to prevent people going outside and all in all the effects were largely negative.

The representatives from Highways England advised they were responsible for carrying out an assessment to understand the baseline data and demonstrate the expected impact which would be presented to the Planning Inspectorate and the Secretary of State. The Director of Public Health asked whether a full Health Impact Assessment would form part of the Environmental Assessment. Highways England stated that it would form there would be noise pollution, air quality and community assessments. The Director of Public Health felt this would be inadequate and urged the team to perform a full Health Impact Assessment.

Councillor Allen asked for clarity; as he understood matters, the traffic modelling and air quality assessments would be based upon predictions. Predictions would be made regarding traffic flow, taking into account local development plans for Local Authorities and Government Guidance for traffic modelling.

Councillor Piccolo questioned how robustly the traffic modelling was checked against real-time data, such as the effects of a 2-lane accident on the current crossing or the M25. The model was calibrated against real-time data though it could not be guaranteed that it would capture data such as Councillor Piccolo suggested.

Councillor B. Little requested that all questions which had not been answered be sent to Highways England in one document.

16. Environmental and Air Quality Issues

The Independent Technical Advisor on Environmental Issues and the Assistant Director of Highways & Transportation outlined the coverage of an Environmental Impact Assessment (EIA) Scoping Report and its role within the national infrastructure planning process.

The Director of Public Health felt the Council should stress the importance of a full health impact assessment, rather than having it fall within the Air Quality and Noise Pollution assessments. The Thurrock Business Representative did not believe Highways England would be able to avoid a full assessment given the enormity of the project. The Independent Technical Advisor on Environmental Issues advised that this should form part of the Council's response to the EIA Scoping Report.

Councillor Jones agreed with the points highlighted as of importance to Thurrock and felt the scheme description would also be paramount, to understand the proposed location of slip-roads and junctions to fully assess the impact. He then asked who would be responsible for the placement of diffusion tubes. Highways England would select the locations but Thurrock Council could review the choices and request additional data if necessary. Councillor Jones felt it should be the Local Authority who decided the location

of diffusion tubes. Councillor B. Little requested clarification upon the length of time data should be collected via diffusion tubes. He had been led to believe data should be trended for 2 years. The Independent Technical Advisor for Environmental Issues confirmed that the tubes collected data one month at a time, and for the data to be statistically relevant it should be collected for at least a year. Sometimes data was only collected over three months however discussions with Highways England suggested data would be collected for a year. Councillor B. Little stressed that, given seasonal variation and the effects of different weather conditions, the assessment could not be fully carried out in three months.

Councillor B. Little also queried whether major issues such as high winds, significant congestion and the effects of Christmas shopping at lakeside, or security closures at the dock could be included within the scoping report. Though not every day occurrences they were frequent enough to be of note.

The Vice-Chair agreed that the scheme description would be of great importance to the Local Authority. He wanted to see tunnels in highly populated areas, Thurrock saw the worst air quality figures outside of London and there should be careful consideration. While it was accepted that the Council was fully against the proposal for an additional crossing it would be necessary to ensure that, were the project to go ahead, it was in the most beneficial way to Thurrock possible and for that Members required full details. He was keen to understand how many intersections would form part of the route. The Independent Technical Advisor on Environmental Issues advised that those details should be covered within the scheme description.

The Chair asked how the project would fit with Government regulations regarding Climate Change. The Task Force was advised that the impact on climate change and the carbon emissions should be assessed as part of the process, in line with Government plans.

Councillor Allen expressed his view that the proposed route had been chosen by the Government and Highways England as it was cheapest, since there were no tunnels involved. He also felt that, alongside the Government's requirement for Thurrock to provide 32,000 new homes, this route was designed to unlock Green Belt land. He continued that there had been an alternative option which had proposed an 8km tunnel under the borough which would have caused no impact on Thurrock, with the emissions filtered. He felt that the proposed route showed no regard for the people of Thurrock. The Independent Technical Advisor on Environmental Issues assured the Task Force that air quality would need to be considered and all findings would be presented to the Secretary of State.

The Thames Crossing Action Group Representative noted that Thurrock Council had undertaken air quality surveys in the borough for the past 20 years and there had been an increase each year in the number of problem areas. A Freedom of Information request had shown that the Council spent £33,000 a year on one person to resolve issues regarding air quality. The existing 17 poor quality areas needed to be addressed, the baseline data

needed to be reduced to address existing issues. The Assistant Director of Highways and Transportation advised that there had been progress regarding issues with initiatives for improving air quality. The aim was to distance traffic, particularly HGVs, from residential properties where possible. It was necessary to find a way to allow for industry growth in the borough, without it being at the detriment of residents. The Thames Crossing Action Group Representative requested data from Highways England as to the expected difference in air quality impact between route 3 and the A14 route.

Councillor Okunade agreed that everyone was concerned about the health implications of the impact on air quality in the borough. She was unsure how 'distancing' HGVs from residential areas would have much effect, since particulates were in the air and would spread. Councillor Okunade queried whether the scoping report would target the worst affected areas and if topics were weighted in any way. She echoed the Vice-Chair's sentiments that, while she did not want the crossing to go ahead, it would be crucial to make a serious case for Thurrock if the proposal were approved. The Task Force heard that air quality had been focused on so far and other disciplines would be looked at. Any areas with significant impact would make it difficult for the Secretary of State to approve the scheme.

Councillor Allen asked if it would be possible for the 20 years of data on air quality, collected by the Council, to be presented to the Task Force as he did not believe, with more cars on the roads, how air quality could improve in the borough.

Councillor Piccolo enquired as to whether there was any way to confirm the accuracy of the data collected over the past 20 years, as it would need to be verified to prevent Highways England discounting data if they saw fit. The Independent Technical Advisor on Environmental Issues had been reviewing the data and so far was pleased that it had been intelligently used, and verified on a yearly basis. Any issues within the monitoring, such as tubes near traffic lights or road works, would be visible through monitoring data trends.

Councillor Allen sought clarity around how Highways England's findings would be verified. Both the Lower Thames Crossing team and Thurrock Council would collect data from three diffusion tubes next to a continuous monitor for comparison. Councillor B. Little asked for an explanation of the different monitoring systems, as he felt some Members of the Task Force might be unaware of the differences. It was confirmed that there were several types of monitors. Diffusion tubes were most commonly found on lampposts throughout the borough and collected data a month at a time. There were also continuous monitors that collected data around chemiluminescence and nitrogen dioxide levels. There were currently four continuous monitors in the borough, against which the diffusion tubes were normalised.

17. Key Milestones and Points of Influence

The Corporate Director of Environment and Place presented the Task Force with the Key Milestones and Points of Influence to clearly outline the route of progression.

The Chair asked for an explanation of the Community Consultation response scheduled for spring 2018. This would provide the Council with an opportunity to respond to the consultation works statement provided by Highways England, to outline whether the process was sound and voice any concerns. Councillor Piccolo sought further clarification as the response would precede the actual consultation. It was confirmed that it would be an opportunity to respond to works up to that point and the plans for the consultation process moving forward.

The Vice-Chair wished to ask Highways England whether the route would need to go by Chadwell-St-Mary if there were a roundabout at Tilbury, as this would serve the docks. He reiterated that the Council opposed the proposed crossing, but stressed that these questions would need to be asked if the proposal were approved.

The Assistant Director of Highways & Transportation advised Members that the Environmental Impact Assessment Scoping report would possibly be accompanied by a revised redline boundary.

18. Work Programme

The Chair opened the item by asking the Task Force to confirm their preference for start time moving forward. It was agreed that 6pm was ideal for all Members and Co-Optees.

The Task Force discussed the need for Highways England to be present at each meeting, and who the best representative would be. The Chair commented that there should be a range of specialities present to ensure all questions raised could be answered. Councillor Little reminded the Task Force that the final decisions would be down to Highways England and therefore they should be present at all meetings, with a regular, senior representative. Councillor Piccolo agreed it would be helpful for a senior representative to be present to provide consistency and ensure that if there were any questions which needed to be answered outside of the meeting it could be monitored by Highways England.

The Thames Crossing Action Group Representative felt that there should be an agreed response date for Highways England, as some questions had been raised at the previous meeting which remained unanswered. The Assistant Director of Highways & Transportation highlighted that some queries should be answered within the Environmental Impact Assessment Scoping report which was due to be received at the end of October, however there were some issues raised which would not be covered.

The Thames Crossing Action Group representative requested the Task Force be shown a virtual reality model of the proposed route; which had been

presented to other parties. He also requested full details regarding monies for remedial works on the current crossing to offer better scope on its usage. The Assistant Director of Highways & Transportation clarified that those funds would be the responsibility of a separate division of Highways England than the Lower Thames Crossing team however an update could still be obtained.

The Chair also suggested other outside bodies might be invited to the Committee, such as Campaign to Protect Rural England, Friends of the Earth and similar organisations. The Vice-Chair added that it might be beneficial to invite Buglife for their ecological views.

The meeting finished at 7.42 pm

Approved as a true and correct record

CHAIR

DATE

**Any queries regarding these Minutes, please contact
Democratic Services at Direct.Democracy@thurrock.gov.uk**

Minutes of the Meeting of the Lower Thames Crossing Task Force held on 20 November 2017 at 6.00 pm

Present: Councillors Peter Smith (Chair), Gerard Rice (Vice-Chair), John Allen, Roy Jones, Brian Little and Bukky Okunade

Matt Jackson, Thames Crossing Action Group Representative
Linda Mulley, Resident Representative
Peter Ward, Thurrock Business Representative

Apologies: Councillors Steve Liddiard and Terry Piccolo

In attendance:

Lyn Carpenter, Chief Executive
Steve Cox, Corporate Director of Environment and Place
John Lamb, Interim Assistant Director - Lower Thames Crossing
Ian Wake, Director of Public Health
Helen Horrocks, Strategic Lead Commissioner for Public Health
Fred Raphael, Transport Development Manager
Charlotte Raper, Democratic Services Officer

Before the start of the Meeting, all present were advised that the meeting may be filmed and was being recorded, with the audio recording to be made available on the Council's website.

19. Minutes

The minutes of the Lower Thames Crossing Task Force meeting held on 16 October 2017 were approved as a correct record.

20. Items of Urgent Business

There were no items of urgent business.

21. Declaration of Interests

Councillor Jones outlined that all Members of the Task Force had an interest of some kind.

22. Actions from Previous Meetings

Councillor Little had previously requested that Highways England include a form with their letters to residents which would allow them to indicate that they were happy for their Ward Councillors to be told they had been contacted. This would allow Ward Councillors to be more informed about the needs of specific residents within their Wards, regarding the proposed Lower Thames Crossing. He asked whether this had been done. Highways England stated

that this would have to be subject to legal review within the organisation. Councillor Little emphasised that a simple 'opt in' arrangement would satisfy all Data Protection requirements such that Thurrock might readily understand comments being received and support the process of inclusive consultation that Highways England had claimed.

The Chair noted that the Lower Thames Crossing Action Group Representative had requested data around the difference in Air Quality impact between the proposed route 3 and the A14 option. It was confirmed that, to date, this information had not been received from Highways England.

Councillor Jones highlighted that Highways England were not engaging regarding information and the general feeling within Thurrock was that the scheme would go ahead without engagement with local communities.

The Vice-Chair referred to previous enquiries regarding the elevated sections of the proposed design, and he hoped that this would be touched upon in the update from Highways England later in the meeting, as it was of great importance for local residents. The Highways England Representative expressed that he would be happy to touch on the issue but a higher level of detail would require more time than their allotted time for the presentation. He indicated that it would be beneficial to hold a longer meeting in future to allow for greater depth. Councillor Jones interjected that there had been no response regarding the elevated sections within Thurrock, yet the report showed there would be more scenic options such as cut-ins in Kent. He felt Thurrock was already being neglected and would be happy for the meeting to run longer if it meant that concerns and queries could be answered.

The Chair echoed that there was an overall feeling of frustration amongst Councillors, officers, the Thames Crossing Action Group and residents as it appeared that Highways England were failing in terms of communication. He hoped there would be improved responses moving forward, and proposed that Actions 1-10 be covered at the current meeting.

The Highways England Representative asked if there were any specific responses which required further expansion.

Councillor Little echoed his earlier comments around contact with residents. It was confirmed that Highways England held a database of everyone who contacted them regarding the scheme though it was not certain that this could be sifted. With regards to sharing details of land owners and residents whom Highways England had contacted it was a matter of data protection laws. The professional opinion of a legal expert would be sought and a response brought back to the Task Force. The suggestion of residents allowing their details to be shared would be considered as part of this. Councillor Little again emphasised the option of a simple 'opt in' approach that would help Thurrock and demonstrate that Highways England were undertaking meaningful consultation and consideration.

The response to Councillor Piccolo's previous query around traffic originating in or destined for Thurrock indicated that the information would be available soon. Councillor Jones asked, on behalf of Councillor Piccolo, whether there was any estimate of when the information would be available. The final traffic model would be shared with Officers from Thurrock Council in December, and once they were satisfied it could be shared on a wider scale. Councillor Jones expressed his amazement that Highways England did not possess this data already, given the scale of the proposal. The Highways England Representative clarified that the majority of the data was complete, but projected freight movements were still awaited from the Department of Transport and it would be pointless to share incomplete data. It was also confirmed that the data from 2001 had formed the baseline but was now complete up to 2016.

The Vice-Chair noted that whether the route would be four or six lanes was still being reviewed. Given that the application was due to be with the Planning Inspectorate in the near future he felt that the design should be at a stage where they knew one way or the other. He asked for details around the cost increase between 2-lane traffic and 3-lane traffic. The Task Force heard that the scheme had been developed from the preferred route announcement in April and would continue to undergo investigation and scrutiny, particularly during the public consultation. The Vice-Chair again queried how Highways England could make informed choices regarding the route and two or three lanes without a traffic model that worked.

23. Highways England Update: Scheme update and engagement & consultation

The representatives from Highways England presented their plans for consultation and engagement as the scheme progressed.

The Chair stressed that information should not only be shared digitally, elderly residents and others without access to the internet must receive information at the same time as others. Highways England stated they were keen to represent everyone and would do their best to ensure information would be sent in the best way, taking guidance from Thurrock Council, as information should be open for access to all. There were currently 250-300 interest groups, stakeholders and businesses to be contacted and 47,000 responses had been received at the options phase. The Chair requested the data from the 47,000 responses and noted that Thurrock Council had not received a copy of the consultation report. These responses covered all stakeholders for the scheme but, following discussions around legal issues, a response would come to the Task Force. As for the consultation report, it had been published on the Lower Thames Crossing website as part of the preferred route announcement.

Regarding interest groups, the Director of Public Health noted that there was no mention of health agencies. Public Health England were mentioned however it was expected that Local Authorities would engage with more localised health authorities. The Director of Public Health reiterated that

Highways England should be engaging with local hospitals, the Clinical Commissioning Group and GP surgeries.

Councillor Okunade questioned whether landowners and property owners that were stakeholders had been identified. The Highways England Representative hoped that this had been fully completed, though there may be some whose property or land lay just outside the redline boundary that had not yet been contacted.

Highways England also held a profile sheet on Thurrock Council, as with all the major Local Authorities affected by the proposal, which was important for strong and direct engagement. Highways England had recently appointed a sole representative responsible for the interests of Thurrock Council, Ian Kennard, who would attend meetings of the Task Force moving forward.

Councillor Jones asked if the aim was to deliver objectives to the Council and local residents. Adjustments could be made taking on board issues concerning the local area.

The Thames Crossing Action Group Representative questioned how there could be a positive outcome with a route through Thurrock, given it was already one of the worst polluted areas with high levels of cardiovascular disease and cancer. The Highways England Representative advised that stationary traffic led to poor air quality therefore air quality should improve. Air Quality was a national issue and motorists needed to be smarter in their movements. A more detailed answer required the baseline to be completed and measured against the correct data but Highways England had already agreed to work with Thurrock giving joint instructions to consultants.

The Thames Crossing Action Group Representative highlighted that £10m had been spent on the current crossing. 86% of traffic was expected to remain and 14% would not reduce the traffic sufficiently to 'get Thurrock moving'. The proposed Lower Thames Crossing would do nothing to alleviate the stagnated M25 and problems at the Dartford Crossing. The Highways England Representative assured the Task Force that ways to help the existing crossing were being explored and there was a need to look at the wider network as a mature operator. The Department for Transport was also considering funding methods and a full commitment would be required to enable the road network to work all the time.

Councillor Allen requested that Thurrock be the first to know details of development within its boundary, including clarification of further steps so Councillors could keep residents fully informed and advised. Highways England should also consider sharing information through the local papers, social media and other methods.

The Resident Representative questioned how many roads in Thurrock were managed by Highways England. She noted that the table regarding air quality excluded any roads directly managed by Highways England and, given the high number of heavily congested roads within Thurrock which were managed

by Highways England, this data was a misnomer. She also requested that the information be made more understandable for local residents. The Highways England Representative agreed that information needed to be accessible and understandable, therefore as much analysis as was necessary would be undertaken to ensure this was the case.

The Vice-Chair stressed the serious situation around air quality, as the borough was the worst outside London. He continued that tunnelling was common in London and requested that Thurrock be given the same level of mitigation in areas of major population. The welfare of residents was a key responsibility and junctions elevated to 10m would not look after them. He asked that Highways England seriously consider redesigning the scheme so that the interchange would be underground.

Councillor Jones queried whether the traffic data regarding the A13 was up to date. Thurrock was often gridlocked at present and he felt that this problem would extend further into Essex if the crossing were to go ahead. The A13 was under a lot of pressure and the data around freight movements and London Gateway Operations were still required. The traffic model data was still incomplete and thus could not be released but once it was complete the aim was to offer relieve on the A13 and in the centre of Grays.

The Chair stressed that the Task Force and all elected Councillors, had a duty to residents and therefore would leave no stone unturned regarding proposals. Highways England aimed to ensure the scheme had as low an impact as possible and reminded the Task Force that the design was not final, there was need to listen to residents, the Council and other stakeholders to ensure the right solution.

The Highways England representatives outlined the design scheme including locations of cuttings, elevations and junctions. Councillor Jones queried the route through Tilbury and East Tilbury. The original scheme for the preferred route through Tilbury, East Tilbury and Linford had been higher. Now everything was ground level or lower with the exception of elevated sections crossing the Tilbury loop and Linford Road. Councillor Jones questioned whether tunnelling had been considered to address the visual impact, it had not at this stage.

The Resident Representative noted that the proposed areas to be in cutting were mainly in those areas with low population figures. She expressed the view that Highways England only seemed to mention Tilbury, and had paid no heed to communities of East Tilbury, West Tilbury and Linford which would see elevated sections in close proximity to residential properties. She asked why the route could not be tunnelled in those sections which passed by homes. Highways England were also considering these options as part of the design process, a model would help to make the design clearer and easier to understand.

Councillor Little noted the massive change in the proposed design since the last iteration seen by the Council. Some of the changes were pleasing but he

felt there was still a long way to go. He recognised that if the final decision was that the crossing should go ahead the Council should work to ensure the scheme had as little impact as possible on the local communities. He sought assurances that local roads, bridleways, cycle paths and similar routes would not be cut off. The Highways England Representative confirmed that all existing routes would have crossings to maintain access.

The Chair noted that a new tunnel had been announced as part of the design, though it was outside of Thurrock.

The Vice-Chair interjected that it might be helpful for the large-scale map to be emailed to Members. He was surprised by the proposal for crossing the railway at East Tilbury and added that, like those in London, tunnels would save the issues of up and down, and the impact on residents and the environment. He noted that 14% of traffic was expected to divert from the existing crossing however with 6,000 trucks coming from developments in Tilbury most would opt for the new crossing over Dartford. It would be impossible to provide an answer until the traffic modelling was complete, as a natural shift was expected for some traffic from the existing crossing but also there would be new movements not yet in place.

The Thames Crossing Action Group Representative sought clarification regarding the proposed interchange at Orsett, which appeared very complicated with elevated and lowered sections. He asked how local connections could remain intact. The amended scheme ensured that Baker Street would no longer be cut off and saw a roundabout introduced near Orsett to connect the A1013 and the A1089. The aim was to keep local connections separate from key points. The Thames Crossing Action Group Representative raised his concern about linking the A1089, albeit potentially declassified, with Stanford Road and urged Highways England to work to prevent the route being used as an 'escape point' in the event of accidents on the wider network.

The Chair also expressed concern regarding the net effect of the new crossing, which would see Thurrock entrapped between two routes and creating a huge problem of cross-borough traffic.

Councillor Allen felt the scheme would be devastating to Thurrock, both in terms of the visual impact and health factors. It risked driving a stake through the heart of the borough's areas of natural beauty and historic significance. He asked what mitigations would be in place for the elevated sections. He felt that acoustic fencing should be a minimum requirement but also requested that in areas of high population cut and cover be in place to reduce both noise pollution and impact on air quality. The Highways England Representative outlined that they had a duty to mitigate against all impacts and the scheme could provide benefits through local engagement. Much could be done to lessen the impact and enhance areas around infrastructure, providing an opportunity to invest in the future.

The Chair requested that large scale maps be provided to each elected Member of the Council and continued to question plans for the route across the Orsett fens. The design currently featured a simple structure though there was a minimum height for maintenance and to ensure traffic could still flow in adverse conditions, as the area was a flood plain. The Chair asked what height the structure would be and was informed that it would stand 5.5m above ground level.

Councillor Little urged Highways England to be explicit that proposals were not currently fixed and final to avoid a risk of miscommunication with residents. Highways England confirmed they were happy to share the current map but with the caveat that it was not set in stone. They hoped to find an appropriate way to display details of the scheme to everyone but there were questions about how to ensure everyone could see it. A virtual reality model would allow for improved understanding of elevations and sightlines, but not everyone had digital access. Thurrock Council's assistance would be welcomed in finding the best solution.

The Vice-Chair welcomed these assurances. He mentioned that parts of the A13 were covered with 'quiet tarmac' and asked whether it would be used for most of the route for the proposed crossing. The Task Force was assured that much could be done through civil engineering to make a scheme pleasing and low-noise surfacing was a Highways England standard.

Councillor Allen raised concern around the impact of construction and sought assurances that no works would be undertaken outside of normal working hours Monday to Friday to cause as little disruption as possible to residents. No definite commitment could be given around the construction of the tunnel itself but Highways England would work closely with the Council to achieve the best outcome for Thurrock.

The Representatives from Highways England left the meeting at this point.

24. Council's Proposed Response to Environmental Impact Assessment Scoping Report

The Corporate Director of Place introduced the report. At the previous meeting of the Task Force Members had covered the areas that mattered most to Thurrock. The Environmental Impact Assessment Scoping Report had been received by the Council on 2 November 2017 and a response from Thurrock Council was to be submitted to the Planning Inspectorate within 28 days.

The Independent Technical Advisor on Environmental Issues gave a brief presentation which outlined the purpose of the scoping report, how it had been reviewed and key areas of note.

The Thames Crossing Action Group Representative noted there were three Grade 2 listed buildings by the proposed Orsett junction and asked what protections were afforded to them. The EIA Scoping Report had shown that

these were being assessed correctly but full details would not be known until the full Environmental Impact Assessment was completed. The Independent Technical Advisor on Environmental Issues expressed that it was more worrying that a scheduled monument would be dug up at Orsett, yet no reference was made to this within the scoping report.

The Thames Crossing Action Group Representative queried whether the 2km assessment for visual impact would be 1km from the centreline in either direction, or whether the 2km would be in both directions from the centreline. It was confirmed that the assessment area would cover 2km in either direction from the centreline of the proposed carriageway.

The Vice-Chair queried whether Highways England would be advised of the number of populous in areas of high population. This would be taken into account as part of the air quality assessment and significant weighting would be applied accordingly.

Councillor Little stated that he was impressed by the number of evidence-based objections that had been put forward. Section 3.61 of the report advised that Tilbury Energy Centre should be included within the assessment of cumulative effects and suggested that the response also note that DP World was not currently working at full capacity and therefore its traffic figures were still due to increase.

Councillor Allen questioned whether there was a clear trend within the air quality data within Thurrock over the past 20 years. The Task Force was advised that levels decreased quite quickly in the early years and then plateaued somewhat. The Air Quality Management Areas (AQMAs) still needed to be in place but levels were coming down overall. Councillor Little added that there were 17 AQMAs in Thurrock and it had been proposed to remove 7, however they would remain in place given the potential crossing.

The Chair noted that section 3.14 of the report advised that the DEFRA's Emission Factor Toolkit was likely to underestimate emissions and sought further explanation. The Task Force was advised that it was widely known that the toolkit underestimated PM2.5 and PM10, however methods were available to uplift figures to worse-case scenarios and this had been requested. The issue was beyond the realms of the software in use.

Councillor Okunade queried who would be the judge of whether mitigation was sufficient, as per 3.8 of the report. The Independent Technical Advisor for Environmental Issues clarified that if modelling suggested any worsening in noise levels and air quality the plan would need to be amended to mitigate those issues however it was the responsibility of the applicant not the statutory consultees to consider these issues.

The Resident Representative asked whether there was any significance to the fact that the DEFRA figures excluded roads managed by Highways England. The Independent Technical Advisor for Environmental Issues could not comment from the Council's perspective but would look into the matter further.

Councillor Little queried the mention of 'materials' but no section on 'construction'. The noise, vibration and air quality impact from lorries over a construction period of six years would be huge. The Task Force heard that data regarding vehicle movements would be captured within the remit of air quality and noise pollution. Details of the impact of the construction specifically had been requested but Highways England were looking into using the river and railways to deliver materials in an attempt to reduce vehicle movements.

Councillor Jones questioned why the scoping report did not fully justify the reason for the route chosen. Members were advised that the decision process would have been well documented however it had not been clearly brought out within the scoping report.

The Thames Crossing Action Group Representative stressed the need for joined up thinking at this stage to ensure issues within Thurrock, such as power networks and AQMAs by the dock, were properly addressed. He could think of no way to mitigate against 60,000 extra vehicles in the borough, bar continuous tunnelling. The Chair expressed quiet confidence that officers were experienced and would be on top of the situation. The Corporate Director of Place agreed that the cumulative impact of everything happening needed to be assessed. The traffic modelling data would take into account all extra development within the area up to 2026/2027.

The Chair noted that within the responses from technical advisors the question of the A14 route versus Route 3 was raised which showed a weakness in the scope.

Councillor Jones sought further information around the potential hazardous historic landfill at Goshem's Farm. The site predated restrictive legislation therefore could contain anything and there was a need to consider whether the impact of the development could cause hazardous chemicals to permeate.

The Chair summarised that Officers should revisit the scoping report to see if there was anything else to uncover to strengthen the Council's response. The proposal had been updated to include additional tunnelling outside of the borough so reasonably the same could be done within Thurrock and there were real concerns around the height of elevated sections.

Councillor Allen felt that Highways England were only focusing on the cost of the scheme without considering the health and wellbeing of Thurrock residents. He noted that the red line boundary covered a Victorian tip in Tilbury and questioned whether the proposed route would cut straight through. Details around portals were still very vague; both on the North and South side of the river, and this could be part of the reason for that.

The Chair noted that the A13 widening works had uncovered sites of archaeological significance, and given the scheduled monument already raised asked whether Mucking Excavation Group, the British Museum or other

agencies had been contacted to see what could be done. It was confirmed that the feedback from the archaeological specialist advised there were sites of national significance and the area had been on their radar for some time.

25. Work Programme

The Democratic Services Officer advised that the update listed for December would go to Cabinet rather than General Services Committee.

Councillor Little declared that he, and the other Members of the Task Force had received a letter from Stephen Metcalfe MP offering his assistance if required.

Councillor Rice requested that Officers liaise with Highways England to ensure Members received copies of the large-scale maps as agreed earlier in the meeting.

The Thames Crossing Action Group invited Members to their meeting to be held on Sunday, to reinforce the strength and show of united support within Thurrock for their cause.

The meeting finished at 8.30 pm

Approved as a true and correct record

CHAIR

DATE

**Any queries regarding these Minutes, please contact
Democratic Services at Direct.Democracy@thurrock.gov.uk**

Minutes of the Meeting of the Lower Thames Crossing Task Force held on 25 September 2017 at 5.15 pm

Present: Councillors Tom Kelly, Brian Little, Terry Piccolo, Roy Jones, John Allen, Peter Smith, Barbara Rice and Steve Liddiard

Matt Jackson, Thames Crossing Action Group representative (Substitute)
Peter Ward, Thurrock Business Representative
Michael Loveday, Resident Representative

Apologies: Councillors Bukky Okunade

George Abbott, Thames Crossing Action Group Representative

In attendance: Lyn Carpenter, Chief Executive
Steve Cox, Corporate Director of Environment and Place
Ann Osola, Assistant Director of Transportation and Highways
Fred Raphael, Transport Development Manager
Robert Audsley, Highways England
Chris Marsh, Highways England
Tim Wright, Highways England
Lottie Raper, Democratic Services Officer

Before the start of the Meeting, all present were advised that the meeting may be filmed and was being recorded, with the audio recording to be made available on the Council's website.

1. Appointment of Chair

The Corporate Director of Environment and Place welcomed everyone and introduced the meeting outlining the role of the Lower Thames Crossing Task Force. The Democratic Services Officer outlined the process for the nomination and election of Chair and Vice-Chair.

Councillor Kelly nominated Councillor B. Little as Chair; this was seconded by Councillor Piccolo. Councillor Allen nominated Councillor Smith; this was seconded by Councillor Jones.

Members were given the opportunity to vote. As there was an equality of votes, the matter was determined by the drawing of lots, in line with the Constitution. Councillor Smith was the successful nominee and the Committee were satisfied with the result.

2. Appointment of Vice-Chair

The Chair asked for nominations for the Vice-Chair position.

Councillor Liddiard nominated Councillor B. Rice, which was seconded by Councillor Jones.

Councillor Piccolo nominated Councillor B. Little, which was seconded by Councillor Kelly.

The Committee voted in favour of Councillor B. Rice.

3. Items of Urgent Business

There were no items of urgent business.

4. Declarations of Interest

There were no declarations of interest.

5. Highways England Presentation

Representatives from Highways England gave a presentation to the Committee which outlined key details of the design and process, including key dates to note in terms of decision deadlines moving forward.

The Thames Crossing Action Group representative asked what the expected capacity would be if three lanes were to be used, given that the expected capacity for two lanes was approximately 70,000. The Committee was advised that the increase was not linear as it would be a matter of how well the lanes were occupied. The expected figure was around 85,000-90,000.

Councillor Jones asked for clarification around the proposed height of the roads in the elevated sections. The route would be lowered where possible but it would need to be elevated in part to avoid landfill, flood risk areas and other roads. The section from East to West by North Ockendon would be 6m or 7m above ground level. Councillor Jones noted that it would be visible for miles due to its height.

The Chief Executive interjected that it was crucial that Highways England clearly outlined what aspects might be influenced by the Council and businesses and what would be beyond their control. Everyone involved was entitled to understand exactly what could be influenced before engaging with the public. The Highways England representative agreed that their intention was to make it obvious what could and could not be changed. At the time of the consultation the year before, the process was still in very early stages but now, with a more developed understanding of traffic movements, environmental issues and other factors it was possible to give a clearer picture around what aspects of the proposal could be influenced and altered.

The Chair noted that the data modelling for local traffic had been undertaken several years previously. Given the extensive works carried out along the A13, he queried whether it would be necessary to revisit this. The Task Force heard that this was definitely correct. Highways England had a requirement to

update their information regarding local traffic surveys and local plans. The forecast on both strategic and local road networks would be updated, with the last full year of data being 2016.

Councillor B. Little asked if it would be possible for Thurrock to have access to information regarding its own areas. The information would be made available where possible, some could not yet be released as it was still undergoing Highways England's internal assurance policies.

Councillor Jones enquired whether this would include data regarding air pollution. Highways England were beginning their surveys around air quality presently and the data collected would form the baseline for all future information. It was their intention to share this information too. Councillor Jones wished to clarify the public consultations process as it had been somewhat vague in the last instance. The public consultation would include a period of engagement with local forums, information would be published online and in libraries and there would be public meetings to ensure residents could be heard.

Councillor Piccolo noted that the statutory consultation was listed for mid-2018 yet surveys were scheduled to be ongoing into 2019. He felt the outcomes of these surveys would be relevant to the consultation and it seemed strange to hold the consultation without some of the information. The Highways England representative outlined that the statutory consultation would provide a snapshot of the information obtained up to that point in time and more refined information, around ecology and other areas, would continue to develop overtime. The engagement process would be ongoing up to the submission of the Draft Development Consent Order (DCO). It was not unusual to gather data in a prioritised way and it would all be presented in the DCO.

The Vice-Chair stressed that Thurrock Council still held the official position that they wished for no further crossings within Thurrock. The Task Force had been formulated to better understand proposals and represent the interests of residents. She felt the presentation assumed that this would be the road forward and while Members wanted to ensure any development was made as easy as possible for residents, the Council's position had not changed. Residents should not be an afterthought, the key issues were what would be done for residents and how would their lives be impacted upon. It was understood that the Task Force represented strong views and Highways England were keen to engage regarding impact particularly around schools, road network and the local community.

Councillor B. Little requested that if letters were sent to residents affected by the scheme they could be asked if they were happy for the Council to be contacted. During the last consultation Councillors had no way of knowing which residents had been contacted and it had therefore been difficult to engage with the necessary residents within their wards.

The Chair encouraged Co-Opted Members to join the debate as their views were important.

Councillor Allen asked whether Highways England had an interest in the health and wellbeing of Thurrock residents, particularly in terms of air quality. Levels of above 40 parts/million were considered dangerous and certain areas within Thurrock already measured levels of 56 parts/million. An increase of vehicle movements throughout the borough would increase pollution levels and he wanted to know what would be done to protect residents. It was confirmed that Highways England's assessments would account for changes in vehicle movements and vehicle quality over time, as well as environmental factors. Forecasts would be carried out and the aim was to minimise effects on local residents and pollution as far as possible.

Councillor Allen continued that the air quality was 'to be predicted' but there was already evidence of poor air quality within Thurrock. The aim might be to minimise the impact but it was unlikely that vehicles would be stopped from using the new route and therefore there were no assurances for residents. He felt the situation would become increasingly worse. The Highways England representative recognised concerns and outlined that there was a duty to explain what they believed effects would be. There was a desire to work with residents and address their concerns.

Councillor Piccolo requested data showing the figures for traffic originating in Thurrock or whose final destination was Thurrock, to assess the percentage of traffic that was actually related to Thurrock itself.

Councillor Kelly expressed his view that the group was somewhat restricted. While there was no desire to sound as though the Council's position had changed, Members also had to be pragmatic in their approach to ensure that, whatever the outcome, it was as beneficial as possible for Thurrock. He had a number of concerns regarding proposed Route 3, which he would raise at the next meeting.

Councillor B. Little highlighted that the construction phase would impact tremendously on Thurrock. If the development were to take place he asked that Highways England work to ensure the Council was comfortable with the impact and mitigation in place. The DCO had to be consulted with Local Authorities and residents. This would be a major project and therefore concerns regarding construction traffic, dust and noise would be mitigated as much as possible. There were intentions to use the Thames as much as possible to reduce the effects of construction traffic.

The Thames Crossing Action Group representative referred to the proposed elevated section at Baker Street which would be 60m high with high polluting HGVs. This section would run alongside a conservation area and he asked whether it would be possible for that section of the route to be tunnelled. He also noted that the proposed new junction in East Tilbury would have a huge impact on a small neighbourhood. The Orsett Cock roundabout would be used by DP World traffic too, so he asked whether it might be possible to

move the junction further east to mitigate the number of HGVs forced onto the Orsett Cock roundabout and roads nearby. The Highways England representative agreed to liaise with the engineering department for a response to these points. The Chair requested that a member of the engineering department attend a meeting in future to discuss possibilities.

6. Terms of Reference

It was noted that whilst the Terms of Reference were important, they were not completely defining of the Task Force.

Councillor B. Little raised the question of nominating substitutes and Councillor Piccolo agreed that he wished to discuss in more detail. The Vice- Chair also highlighted the possibility of inviting other parties to offer their input.

The Task Force agreed to discuss this item fully at the next meeting.

7. Governance and Decision Making

The Task Force agreed to discuss this item at the next meeting. Councillor Liddiard also proposed submission of written questions.

8. Any Other Business

There were no other items of business.

9. Work Programme

Officers noted that a number of items had been raised for the next meeting's agenda. It was agreed that a full work programme would be formulated then.

The meeting finished at 6.20 pm

Approved as a true and correct record

CHAIR

DATE

Any queries regarding these Minutes, please contact
Democratic Services at Direct.Democracy@thurrock.gov.uk

Lower Thames Crossing Task Force Action List

Action	Responsible	Completed?
September meeting		
Councillor B. Little asked if it would be possible for Thurrock to have access to information regarding its own areas. The information would be made available where possible, some could not yet be released as it was still undergoing Highways England's internal assurance policies.	HE	We are currently reviewing the traffic data for the whole of Thurrock and we hope to be able to provide this as soon as possible.
Councillor Piccolo requested data showing the figures for traffic originating in Thurrock or whose final destination was Thurrock, to assess the percentage of traffic that was actually related to Thurrock itself.	HE	We are currently reviewing the traffic data for the whole of Thurrock and we hope to be able to provide this as soon as possible.
The Orsett Cock roundabout would be used by DP World traffic too, so he asked whether it might be possible to move the junction further east to mitigate the number of HGVs forced onto the Orsett Cock roundabout and roads nearby. The Highways England representative agreed to liaise with the engineering department for a response to these points.	HE	<p>We are focused on developing the preferred route which was announced in April 2017. Further refinement work is ongoing.</p> <p>With the latest scheme the Orsett Cock roundabout movements are not affected because the A128/LTC junction link has been removed.</p> <p>The updated LTC/A13 Junction is located to allow for weaving on the A13 between adjacent junctions which are already at their minimum weaving length.</p>
October Meeting		
Updated Survey data	HE	The baseline surveys are ongoing and commenced in August. Once the traffic model is available the relevant air quality assessment and modelling will be undertaken, which we will then share.
The Vice-Chair asked for clarification around the scheme design, such as the possibility of 'cut and cover' or tunnels. He felt the proposal to have	HE	The LTC scheme is still under development and the vertical profile is being

sections of the route elevated to 5-8m would hardly be conducive to minimise the impact on residents. He also noted ambiguity as to whether there would be four or six lanes and requested that Highways England confirm these details. The representatives present were responsible for surveys and the EIA Scoping Report therefore did not have the requested information but it would be fed back outside of the meeting.		<p>reviewed to mitigate any potential local impact.</p> <p>Under the current scheme it will be dual 3 from the A2 up to the A13 junction; and dual 2 from the A13 to the M25. However, we are still reviewing the latest traffic model figures which will need to be validated.</p>
Link to documents outlining decision process	HE	Completed
The Thames Crossing Action Group Representative requested data from Highways England as to the expected difference in air quality impact between route 3 and the A14 route.	HE	Assessments would have been undertaken for the routes that were shortlisted, including route 3. However, the A14 was discounted at an early stage as it “performs poorly against the traffic and economic scheme objectives”. Further information will be provided next week.
The Vice-Chair wished to ask Highways England whether the route would need to go by Chadwell-St-Mary if there were a roundabout at Tilbury, as this would serve the docks. He reiterated that the Council opposed the proposed crossing, but stressed that these questions would need to be asked if the proposal were approved	HE	<p>We are focused on developing the preferred route which was announced in April 2017.</p> <p>The LTC route will bypass Chadwell St-Mary to the north and there will be a separate link road and junction to Tilbury to the south of Chadwell St-Mary. This will result in fewer HGVs using the A1089 and reduce the traffic.</p>
The Thames Crossing Action Group representative requested the Task Force be shown a virtual reality model of the proposed route; which had been presented to other parties.	HE	The visualisation shown at SAP is outdated as the project has developed. However, we have an updated visualisation which we plan to share at the next Task Force meeting.
He also requested full details regarding monies for remedial works on the current crossing to offer better scope on its usage. The Assistant Director of Highways & Transportation clarified that those funds would be the responsibility of a separate division of	HE	Highways England’s Dartford Crossing operations team is currently looking how best to invest the extra £10m

<p>Highways England than the Lower Thames Crossing team however an update could still be obtained.</p>		<p>the SoS announced is being made available to invest in short term improvements at and around the Dartford Crossing. Similarly, the same team is working on a medium term of improvements.</p>
<p>November meeting</p>		
<p>Brian Little raised the suggestion of an 'opt-in' system for residents to allow info to be shared with their Councillors. HE advised they would seek legal advice around possibilities.</p>	<p>HE</p>	<p>It is Highways England policy not to share individuals' personal data with local authorities unless there is a legal obligation to do so. This extends to entering into voluntary data sharing agreements, where the permission of affected landowners would need to be secured in order for their contact details to be shared.</p> <p>However, we are keen to explore how we can work together to help you achieve your objectives without the necessity to share personal data.</p>
<p>Gerard Rice requested large-scale maps be emailed to Members.</p>	<p>HE</p>	<p>Maps were shared with Thurrock Council on 06 December.</p>
<p>If the proposed crossing were to go ahead, Members highlighted the following essential mitigation measures:</p> <ul style="list-style-type: none"> • More tunnelling to reduce impact • Use of cut and cover -especially adjacent to areas of population • Interchange with A13 to be put into Tunnel • Low noise surfacing • Acoustic Fencing • No out of hours working 	<p>HE</p>	<p>A series of meetings is currently being arranged between Thurrock Council and Highways England LTC technical teams (aiming for January 2018) to discuss several design development options and at these mitigation discussions can take place.</p>