

Sufficiency Delivery Plan: Version 2

| 1. We will improve the range of provision to meet the needs of our children | | | | |
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| What will contribute to this? | What will we do to achieve this? | When | Who | How will we know we have made a difference? |
| a. Increase the number of prospective adopters available. | i. Develop and deliver targeted recruitment campaigns, focusing on recruiting adopters who can adopt older children and children in sibling groups. ii. Increase the planned adoption of children where effective permanence planning and social work practice shows that this is the best long term option for the child's needs and interests. | TBD TBD | Adoption at Heart Social Workers, Team Managers and Group Managers | <ul style="list-style-type: none"> Number and Rate: Adopters |
| b. Increase the number of internal foster carers | iii. Review of internal fostering to ensure that the service is maximising the impact and increasing their market share. iv. Develop a recruitment and retention plan targeted at areas of need. v. Develop the Regional Fostering Hub. | November 2025 TBD TBD | Commissioning Manger, Joanna Butryn. Group Manager, Mark Burrows Head of Service, Jivan Sembi | <ul style="list-style-type: none"> Number and Rate: Recruitment of internal foster carers Retention of foster carers |
| c. Ensure that residential provision is able to meet the needs of children with complex needs where DoLS restrictions are in place. | i. Meet with local residential providers to assess their understanding and willingness to work with local children. ii. Work with unregistered providers to encourage them to register with Ofsted and provide support in their Ofsted application process. iii. Continue to invest in internal residential provision which meets the need of children | August 2025 As identified Annual Review | Commissioning Manager, Joanna Butryn Commissioning Manager, Joanna Butryn Group Manager, Alan Davies | <ul style="list-style-type: none"> Number of residential providers locally, Number engaging in a meet and greet session, Occupancy (internal) |
| d. Maintain an internal multi-disciplinary model of residential assessment provision for children in crisis in Pineview to children in crisis and support them to live in a foster family or return to their families. | i. Pine View completes observational Assessments for children of any gender between the ages of 6 and 17 years. ii. Children can be admitted to Pine View subject to their plan being for | Annual review | Group Manager, Alan Davies Responsible Individual, Jivan Sembi | <ul style="list-style-type: none"> Percentage of children reunified with families or a suitable Foster home identified resulting in longer term residential care avoidance. |

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| | <p>reunification to family or Foster Care following the Assessment period</p> <p>iii. The Assessment is completed over 8 weeks, allowing for a further 4 weeks to return the child home or to identify a suitable foster carer.</p> <p>iv. Ofsted registration allows us to keep a child at the home for up to 16 weeks from admission if a suitable plan is confirmed by week 12</p> | | | |
| e. Undertake market engagement with external providers to encourage the setting up of new provision locally. | <p>i. Develop a proposal for engaging providers which seeks to compliment national and regional engagement.</p> <p>ii. Facilitate market engagement sessions with local providers centring on belonging.</p> <p>iii. Provide targeted developing the market session</p> | <p>Bi Annual</p> <p>November 25</p> <p>March 25</p> | <p>Head of Children's Commissioning</p> <p>Head of Children's Commissioning</p> <p>Head of Children's Commissioning</p> | <ul style="list-style-type: none"> • Number of providers engaging in local provider forums. • Reported satisfaction from providers about the sessions. • Number of market engagement sessions • Increase in the number of children living locally. |
| f. Increase the number and range of foster carers (aiming to meet the needs of the circa 10 children in residential provision whose preferred option was foster care.) | <p>i. Develop an options appraisal/business case to suggest recommendations on growing internal foster carers.</p> <p>ii. Expanding bedroom capacity of known and valued foster carers through the availability of capital funding to increase foster carer capacity through adaptations.</p> <p>iii. Target recruitment and marketing activity to increase the overall numbers of foster carers.</p> <ul style="list-style-type: none"> ○ Horizon Scheme – step across from children's homes ○ Emergency Fostering Scheme ○ Go Inspire Digital Marketing ○ Behaviour Insights Team ○ Fosterlink Support workshops <p>iv. Ensure we have a consistent approach to recruiting and supporting foster carers across Walsall Council.</p> | <p>TBD</p> <p>TBD</p> <p>TBD</p> <p>TBD</p> | <p>TBD</p> <p>Group Manager, Mark Burrows</p> <p>Group Manager, Mark Burrows</p> <p>Group Manager, Mark Burrows</p> | <ul style="list-style-type: none"> • Number of foster carers. • Number of children living with internal foster carers. • Number of bedroom expansions. • Number of bedroom expansions leading to increased numbers of children living with our foster carers. |

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| g. Improve the way in which we match the needs of children to the type of provision. | v. Implement valuing care as a mechanism to match children's needs, their outcomes and the financial resources allocated vi. Utilise this information to communicate with the sector the position and changes needed. | 12 months post implementation start. TBD (next provider session after analysis) | Social Work Teams Commissioning Intelligence and Monitoring Manager, David Zhu/ Commissioning Manager, Joanna Butryn | <ul style="list-style-type: none"> Number of assessments using valuing care. |
| h. Explore alternative care providers e.g. small VCSE provision locally as an alternative source of care and sharing risk | vii. Develop an options appraisal/business case to explore whether there is the skills, capacity and expertise to work with VCSE for care provision. | March 2026 | Commissioning Manager, Joanna Butryn | <ul style="list-style-type: none"> Number of VCSE providers secured as potential and actual suppliers of care services. |
| i. Assess the risk in the system particularly related to the sector. There has been an acknowledgement that there is significant change in the market which could mean provider failure is more likely. | viii. Conduct an analysis of the range of provision and the utilisation to assess whether there is significant risks to the local authority. | March 2026 | Commissioning Manager, Joanna Butryn | <ul style="list-style-type: none"> Risk assessment Provider Failure Plan generated. |
| j. Ensure provision is affordable and appropriate for the needs of the child. | ix. Cost analysis conducted annually. x. Review additional costs. | June 2025 November 2025 | Commissioning Intelligence and Monitoring Manager, David Zhu/ Commissioning Manager, Joanna Butryn | <ul style="list-style-type: none"> Cost of Care by type of provision. Benchmarking data (National, Regional and SN.) |
| 2. We will improve the quality of care for our children | | | | |
| a. Refresh our shared quality assurance framework for local care provision aligned to the regional process to ensure consistency. | i. Share the identified QA processes locally and regionally. ii. Identify best practice across all 'as is' processes. iii. Define a local process for assessing quality. | September 2025 | Head of Commissioning and Head of Children in Care | <ul style="list-style-type: none"> Number of QA visits undertaken. Number of QA visits undertaken by Ofsted grade. |
| b. Implement a robust quality assurance process to understand the quality of provision locally and ensure that support is in place to improve the quality of care. | i. Develop shared model including defining a criteria for additional support and/or not using providers. ii. Implement and monitor outcomes of refined QA process. | January 2026 | Placement Support Manager, Nicola Cox and Commissioning Manager, Joanna Butryn | <ul style="list-style-type: none"> Quality Assurance approved and implemented. Quality Assurance Visits Quality Assurance Outcomes |

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| <p>c. Provide targeted help to supported accommodation providers to prepare for registration and inspection by Ofsted, ahead of the implementation of statutory regulations across the sector in 2024.</p> | <p>i. Identify local providers of supported accommodation. ii. Risk assess provision e.g. high number of children within provision to target support. iii. Share good practice from 3 providers securing good outcome.</p> | <p>January 2026</p> | <p>Commissioning Officer, Raji Bains</p> | <ul style="list-style-type: none"> • Amount of support offered to RI and Inadequate settings. • Increase the proportion of our children who live in provision that is judged 'Good' or 'Outstanding' by Ofsted. |
| <p>d. Implement and evaluate the impact of valuing care.</p> | <p>iv. Utilise the insights gained from valuing care to help shape the market, ensuring that local providers are able to adapt to the identified needs. v. Evaluate the impact of valuing care toolkit.</p> | <p>TBD (after analyse completed.) 12 months from start of implementation</p> | <p>Head of Commissioning Commissioning Intelligence and Monitoring Manager, David Zhu</p> | <ul style="list-style-type: none"> • Evaluation Report • Presentation Slides • Changing Landscape |
| <p>e. Work with the regulator to share challenges faced by the local authority and the sector to seek shared solutions</p> | <p>vi. Ensure that any key concerns are raised with DCS for escalation to regional meetings with Ofsted</p> | <p>As and when needed</p> | <p>DCS, Coleen Male/ Director for Early Help and Commissioning, Isabel Vanderheeren</p> | <ul style="list-style-type: none"> • Concerns reported |

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| <p>f. Secure a good understanding of Walsall's position using a range of qualitative and quantitative sources.</p> | <p>i. Undertake a internal audit (Identify the children that have experienced moves from family settings into residential provision in last 12 months, Under 10s, High numbers in residential, No of children who have moved into family settings from residential.)</p> <p>ii. Undertake a multi-agency audit to understand the journey of children coming into care and what more could be done to prevent this and/or better meet need.</p> <p>iii. Undertake a quantitative analysis of performance related to (placement stability within Walsall over last 3 years, bench marking, across SN, WM region and National performance, Benchmark Walsall's performance with SN and WM region in relation to internal fostering, IFS, Internal and external children's homes, Cost analysis of cost of care and accommodation for children in residential provision.)</p> <p>iv. Undertake a qualitative analysis considering the impact of key areas such as Valuing Care and Additional Costs (See Action X)</p> <p>v. Understand what single agency audits have been undertaken by health and ensure any findings are built into plans</p> | <p>TBD</p> <p>September 2025</p> <p>September 2025</p> <p>12 months from start of implementation</p> <p>July 2025</p> | <p>Head of Service, Jivan Sembi</p> <p>Head Safeguarding Partnership, Sian Jones</p> <p>Commissioning Intelligence and Monitoring Manager, David Zhu</p> <p>Commissioning Intelligence and Monitoring Manager, David Zhu</p> <p>Director Children's Social Work, Rita Homer</p> | <ul style="list-style-type: none"> • Number of audits completed. • Quality of audits completed. • Learning identified. • Practice changes. |
| 3. We will improve the permanence and stability for our children. | | | | |
| <p>a. Ensure that there is a focus on strengthening family networks from the first contact with Children's social Care.</p> | <ul style="list-style-type: none"> • Map the 'as is' for kinship care. • Assess how well others perform in this area. • Develop a lessons learned to influence our local approach. | <p>TBD</p> | <p>TBD</p> | <ul style="list-style-type: none"> • Number of kinship carers • Stability of kinship care. |
| <p>b. Embed the findings from the IPC SGO and adoption study,</p> | <ul style="list-style-type: none"> • Assessments for potential adopters and SGOs should include in depth exploration of their own experiences and trauma. • SGO assessments and preparation should be as robust as adoption | <p>TBD</p> | <p>TBD</p> | <ul style="list-style-type: none"> • Number of children who achieve stability in kinship care. • Number of children who achieve positive outcomes in kinship care. |

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| | <p>especially when there is contact from birth family.</p> <ul style="list-style-type: none"> • Training and support for SGOs should include in depth work to understand how childhood trauma may present through challenging behaviours and how to manage these behaviours. • Staff working with SGO and adopters need a good understanding of childhood trauma and how this can present. • Offers of support to SGO carers should be pro-active, specialist and when needed. It needs to be acknowledged that this may be long term in nature. • A different approach is needed for children who are harmed by their family compared to themselves and others in the external environment. | | | |
| c. Ensure children who enter care have an effective permanence plan as soon as possible. | <ul style="list-style-type: none"> • Identify and track children under 13 years to ensure that interventions are supporting children to step into family settings (home or fostering) in a timely manner • Ensure children who enter care have an effective permanence plan as soon as possible. | Quarterly Ongoing | TBD Social Workers | <ul style="list-style-type: none"> • Number of children returning home. • Number of permanence plans. • Quality of permanence plans. |
| d. Provide training and support for special guardians to equip them to meet the needs of the child or young person and maintain stability. | <ul style="list-style-type: none"> • Ensure that therapeutic support is available to special guardians through the Adoption Support Fund. • Review impact of Mockingbird to consider further expansion. | TBD | Group Manager, Mark Burrows | <ul style="list-style-type: none"> • Number of SGOs trained. • Quality of training. • Impact of training. |
| e. Develop with partners a process to track factors that might affect stability for children. | <ul style="list-style-type: none"> • Map the factors that might increase the fragility of stability. • Agree the best technical solution to track these indicators. • Implement the tracking system. • Monitor the impact. | October 2025 November 2025 January 2026 October 2026 | Head of Service Group (Anthony, Zoe Morgan and Louise Wright) | <ul style="list-style-type: none"> • Digital tracking system in place |
| f. Take the learning from national and regional ways of working to define and secure a high quality | <ul style="list-style-type: none"> • Review the support to support children's stability providing clear recommendations for any future changes. | TBC | Commissioning Manager, Joanne Butryn | <ul style="list-style-type: none"> • Increased stability for children. • Feedback from children. |

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| and impactful offer to support stability for children | | | | |
| g. Ensure that young people transitioning from care to adulthood receive consistent, high-quality support that promotes independence, emotional wellbeing and long term stability. | <ul style="list-style-type: none"> For children with an EHCP ensure that adults are engaged for their Year 9 review to consider pathway planning. Data for children in care shared monthly with adults services to help plan for children who may require adults services and support. Housing needs strategy developed Workstream for transitions established further develop actions. | TBD Monthly TBD TBD | Lucia Dorrington (Adults) David Zhu Tim Bryant Tim Bryant | <ul style="list-style-type: none"> Feedback from adults who have moved from children's. |
| 4. Keep children close to home: Increase the number of children living in or near Walsall, connected to their communities. | | | | |
| a. Work with local providers to maximise the number of children living locally. | <ul style="list-style-type: none"> Develop provider forms across external providers in conjunction with the Commission Service Seek feedback as to what works well and even better if so that we can develop and refine the offer of support. Spotlight on 'Mental Health Support' to settings session at provider forum. | Starting November 2025 August – December 2025 November 2025 | Head of Commissioning Head of Commissioning Head of Children's Mental Health Commissioning, Mags Court | <ul style="list-style-type: none"> Number of children living in Walsall provision. |
| b. Provide enhanced support to local good quality providers. | <ul style="list-style-type: none"> Define the information we need to share across the local authority. Agree who and how we will respond to this information through an agreed process. Establish a cross-directorate panel to discuss, share and prioritise support for providers. Develop a local offer for providers where they can access high quality help and support. | December 2025 December 2025 December 2025 December 2025 | Head of Commissioning Commissioning Manager, Joanna Butryn Commissioning Manager, Joanna Butryn Commissioning Manager, Joanna Butryn | <ul style="list-style-type: none"> Increase of children living in Walsall provision. |
| 5. Strengthen our workforce and partnerships: Build a skilled, supported workforce and a collaborative system that puts children's needs first. | | | | |

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| <p>a. Ensure that we work with external providers closely to ensure that we understand the challenges that they face and work with them to address these where possible.</p> | <p>i. Initial meetings offered. ii. Intelligence informs the provider forums agenda setting (local focus on belonging) iii. Provider forums held iv. Agreed approach which compliments national, regional and local approach. v. Evaluate the effectiveness</p> | <p>31 July 25 August 25 Nov 25 Sept 25 Nov 26</p> | <p>Head of Commissioning</p> | <ul style="list-style-type: none"> • Issues Logged • Issues raised • Issues addressed/resolve. |
| <p>b. Ensure we work closely with Walsall providers to wrap the local support via our local partners around the children in our care.</p> | <p>i. Develop a 'whose who' for providers so that they know the people available locally to support them to meet the needs of children. ii. Share information with providers on how they can raise concerns about the support provided to children in care if gaps emerge. iii. Develop in person relationships with this network of support. iv. Seek feedback from providers about this approach and areas for development.</p> | <p>October 2025 November 2025 Ongoing Ongoing</p> | <p>Commissioning Officer, TBD Commissioning Manager, Joanna Butryn Head of Commissioning Head of Commissioning</p> | <ul style="list-style-type: none"> • % of children from Walsall living in Walsall homes. |
| <p>c. Work together with the CAHMS collaborative to support children with complex needs access a pathway to more specialist mental health support.</p> | <p>i. Ensure that the workforce know and understand the offer available from the WM CAHMS Collaborative. ii. Ensure that the pathway for support is accessed by SW with those children meeting the criteria. iii. Undertake multi-agency audits to assess the impact of this on practice. iv. Monitor the take up and impact of this enhanced support</p> | <p>TBD TBD As above TBD</p> | <p>TBD TBD As Above TBD</p> | <ul style="list-style-type: none"> • Number and proportion of social workers who know about CAHMS specialist support. • Take up of CAHMS offer. • Number of children accessing CAHMS support. |
| <p>d. Recruit, retain and develop skilled professionals who can meet the need of our children.</p> | <p>i. Continued roll out of DDP, Thera play training and the Nurturing and Attachment training to increase foster carer confidence to manage trauma behaviours ii. Ensure that the workforce adapts to the changing needs of children and is able to evidence high quality care which is focussed on stability for our children.</p> | <p>TBD TBD</p> | <p>Mark Burrows Head of Safeguarding Partnership, Sian Jones</p> | <ul style="list-style-type: none"> • Confidence of the workforce • Retention of carers. • Improved placement stability • Carers say the training offered supports them to provide effective care for our children. |
| <p>e. Good quality referral for children coming into care</p> | <p>iii. Develop a range of examples of a good quality referral. iv. Engage providers and practitioners to secure their views and reflect these in examples prepared.</p> | <p>TBD TBD</p> | <p>Group Manager, Hannah Thompson Group Manager, Hannah Thompson</p> | <ul style="list-style-type: none"> • Improved quality of referrals. |

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| f. Refresh the sufficiency board | v. Review the terms of reference vi. Develop sub reporting structure vii. Review the agenda viii. Reset expectations ix. Ensure effective onward reporting | 14 August 2025 | Director for Children's Social Care, Rita Homer with support from Natasha Moody | |
| g. Secure partnership commitment and action to improving the support for children in care through the CIC Alliance. | x. Present to key partners the new requirements for corporate parents. xi. Secure buy in to develop an improved offer for children in care including priority access to services. | September 2025 December 2025 | Director for Children's Social Care, Rita Homer Commissioning Manager, Emma Aspinall. | <ul style="list-style-type: none"> Improved corporate parenting offer from partners. |
| h. Work with the Voluntary sector to ensure that they understand the needs of our children , the places they live and how they can support within the community. | xii. Work with partners including the VCSE to assess the current capability. xiii. Overlay the local provision to see if there are opportunities to bridge local provision with local children in care. | TBD TBD | Director Early Help, Partnerships and Commissioning Commissioning Officer | <ul style="list-style-type: none"> Range of children who report that they have good networks of support within their community. |
| i. Providers are aware of the role of an advocate and independent visitor. They champion this support with their children. | xiv. Communications Plan targeted at increasing engagement with IV and advocacy xv. Invite the advocacy and IV provider to meet the children's homes providers to build relationships | November 2025 November 2025 | Commissioning Officer Commissioning Officer | <ul style="list-style-type: none"> Number of referrals to IV and advocacy from children's homes providers. Increased take up of advocacy and IV. |
| j. HOLD: Children's relationships are at the heart of the support they receive from their home. | xvi. TBD with children. | TBD | TBD | <ul style="list-style-type: none"> Children report an improvement in their relationships which support them to feel resilient. |