

Time 5.00 pm **Public Meeting?** YES **Type of meeting** Executive
Venue Council Chamber - 4th Floor - Civic Centre, St Peter's Square, Wolverhampton, WV1 1SH

Membership

Chair Cllr Ian Brookfield (Lab)
Vice-Chair Cllr Stephen Simkins (Lab)

Labour

Cllr Obaida Ahmed
Cllr Paula Brookfield
Cllr Chris Burden
Cllr Steve Evans
Cllr Bhupinder Gakhal
Cllr Jasbir Jaspal
Cllr Linda Leach
Cllr Beverley Momenabadi

Quorum for this meeting is three voting members.

Information for the Public

If you have any queries about this meeting, please contact the Democratic Services team:

Contact Dereck Francis
Tel/Email Tel: 01902 555835 or dereck.francis@wolverhampton.gov.uk
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Some items are discussed in private because of their confidential or commercial nature. These reports are not available to the public.

Agenda

Part 1 – items open to the press and public

Item No. *Title*

MEETING BUSINESS ITEMS

- 1 **Apologies for absence**
- 2 **Declaration of interests**
- 3 **Minutes of the previous meeting** (Pages 3 - 6)
[For approval]

DECISION ITEMS (AMBER - DELEGATED TO THE CABINET)

- 4 **Inspection of Local Authority Children's Services, City of Wolverhampton Council** (Pages 7 - 26)
[To present the outcome of the recent Ofsted Inspection of Children's Services and detail actions required for improvement]
- 5 **Reserves, Provisions and Balances 2021-2022**
[To report on the Council's resources currently held as earmarked reserves, provisions and general balances as at 31 March 2022, taking account of the outturn position for 2021-2022][**Report to follow**]
- 6 **Performance and Budget Outturn 2021-2022**
[To provide the Council's outturn position for 2021-2022 compared with approved budgets and targets and performance update against the Relighting Our City priorities][**Report to follow**]
- 7 **Our Commitment to All Age Carers** (Pages 27 - 52)
[To approve Our Commitment to All Age Carers 2022]

CITY OF WOLVERHAMPTON COUNCIL	Meeting of the Cabinet Minutes - 27 April 2022
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Attendance

Members of the Cabinet

Cllr Ian Brookfield (Chair)
Cllr Stephen Simkins (Vice-Chair)
Cllr Obaida Ahmed (Virtually)
Cllr Paula Brookfield
Cllr Steve Evans
Cllr Bhupinder Gakhal
Cllr Dr Michael Hardacre
Cllr Jasbir Jaspal
Cllr Linda Leach
Cllr Beverley Momenabadi (Virtually)

Employees

Tim Johnson	Chief Executive
Mark Taylor	Deputy Chief Executive
John Denley	Director of Public Health
Charlotte Johns	Director of Strategy
Richard Lawrence	Director of Regeneration
David Pattison	Chief Operating Officer
John Roseblade	Director of City Housing and Environment
Alison Shannon	Chief Accountant
Jaswinder Kaur	Democratic Services Manager
Dereck Francis	Democratic Services Officer

Part 1 – items open to the press and public

Item No. *Title*

- 1 Apologies for absence**
No apologies for absence were received.
- 2 Declaration of interests**
Mark Taylor, Deputy Chief Executive and Alison Shannon, Chief Accountant both declared a non-pecuniary interest in item 7 (WV Living Business Plan 2022-2027), insofar as they are directors of WV Living.

3 **Minutes of the previous meeting**

Resolved:

That the minutes of the previous meeting held on 23 March 2022 be approved as a correct record and signed by the Chair.

4 **Housing Revenue Account Owned Assets - Review of non-residential assets**

Councillor Bhupinder Gakhal presented the report that provided an overview of citywide non-residential assets and a small number of residential assets, some located outside the Wolverhampton boundary, owned by the Housing Revenue Account (HRA) and residential properties owned by other Directorates, managed by Wolverhampton Homes. It was proposed to undertake a review of the assets to assess and determine their future use/management; including opportunities where sites could be brought forward for housing development or where it may be more appropriate for the site to be managed by another service area, subject to internal and external consultation.

Resolved:

1. That the commencement of the Housing Revenue Account asset review for citywide non-residential assets and a small number of residential assets to determine the future management of these assets be approved.
2. That authority be delegated to the Cabinet Member for City Assets and Housing and the Leader of the Council in consultation with the Director of City Housing and Environment and the Director of Finance to approve the appropriation of HRA assets to a more appropriate Service Area, following the completion of the asset review and relevant consultation process.
3. That further reports on the progress of the review of HRA assets be submitted to Cabinet.

5 **City of Wolverhampton Housing Performance Report - Quarter Three October to December 2021**

Councillor Bhupinder Gakhal presented the report on the performance of the Council's Housing Management Agents, Bushbury Hill Estates Management Board, Dovecotes Tenant Management Organisation, New Park Village Tenant Management Committee and Wolverhampton Homes Arms Length Management Organisation in managing and maintaining council owned dwellings during quarter three (October to December 2021). The performance for each of the managing agents was against the key areas of rents management; repairs management; and voids and allocations. Councillor Gakhal also read out a statement from Shaun Aldis, Chief Executive of Wolverhampton Homes (WH) on the organisation's performance and areas where it was prioritising key activities to customers.

Cabinet extended its thanks and gratitude to Wolverhampton Homes and the other Housing Management Agents for going above and beyond their normal housing operations to support their tenants and the City's residents over the last two years during the Covid-19 pandemic. Thanks were also expressed to WH for their support in the delivery of the Council's Our City: Our Plan priorities.

Resolved:

That the performance of the Housing Management Agents for quarter three 2021-2022 be noted.

6 Exclusion of press and public

Resolved:

That in accordance with Section 100A(4) of the Local Government Act 1972 the press and public be excluded from the meeting for the following item of business as it involves the likely disclosure of exempt information relating to the financial or business affairs of any particular person (including the authority holding that information).

Part 2 - exempt items, closed to press and public

The Chair reported that as stated previously the meeting was in confidential session as the information included in the report could, if released into the public domain, prejudice the financial position of the Council or its partners. As such all present are under a legal duty of confidentiality and must not disclose any confidential information - to do so would not only be a breach of the Council's codes (for councillors and employees) but also a breach of the legal duty of confidentiality.

7 WV Living Business Plan 2022-2027

Having previously declared an interest in this item, Mark Taylor, Deputy Chief Executive and Alison Shannon, Chief Accountant left the meeting whilst Cabinet considered the report WV Living Business Plan 2022-2027.

Councillor Bhupinder Gakhal presented for approval the annual refresh of the WV Living Business Plan. WV Living had been established as a vehicle to meet Council priorities for housing in the City. The financial implications for the Company and for the Council were considered in the report and recommendations were made for the Council's continued financial support as both a shareholder and lender to WV Living.

Resolved:

1. That the updated business plan for WV Living 2022-2027 be approved.
2. That authority be delegated to the Cabinet Member for City Assets and Housing and the Leader of the Council in consultation with the Chief Executive and the Director of Finance to approve detailed loan agreements, amendments to any loan agreements and the execution of any loan agreements or other financial instruments between the Council and WV Living.
3. That the Council would continue to act as guarantor for contracts entered into by WV Living where appropriate and that authority be delegated to the Leader of the Council and the Cabinet Member for Governance and Equalities in consultation with the Director of Finance and the Chief Operating Officer to authorise any such guarantees.
4. That in the light of the new Business Plan the Council confirms that it has confidence that WV Living is a going concern for at least the next 12 months.
5. That it be noted that updated business plans for WV Living would be brought to Cabinet for approval on an annual basis.
6. That it be noted that the Company would commence recruitment to the approved staffing structure to support the sustainable business plan.

- 8 **Deputy Mayor Elect**
The Chair reported that this would be Councillor Dr Michael Hardacre's last Cabinet meeting before he commenced his year as the City's Deputy Mayor. He thanked Councillor Dr Hardacre for his valued contributions and humour during his time as a Cabinet Member and wished him well for the year ahead.

CITY OF WOLVERHAMPTON COUNCIL	Cabinet 15 June 2022
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Report title	Inspection of Local Authority Children's Services, City of Wolverhampton Council	
Decision designation	AMBER	
Cabinet member with lead responsibility	Councillor Beverley Momenabadi Children and Young People	
Key decision	No	
In forward plan	Yes	
Wards affected	All Wards	
Accountable Director	Emma Bennett, Executive Director for Families	
Originating service	Children's Service	
Accountable employee	Alison Hinds	Deputy Director, Children's Social Care
	Tel	01902 553035
	Email	Alison.hinds@wolverhampton.gov.uk
Report to be/has been considered by	Executive Team	23 May 2022
	Strategic Executive Board	18 May 2022

Recommendation for decision:

The Cabinet is recommended to:

1. Celebrate the 'Good' overall judgement from the recent Ofsted Inspection of Children's Services and note our continued excellent position in the West Midlands and the country.

1.0 Purpose

- 1.1 This report provides an update on the outcome of the recent Ofsted inspection of Children's Services and details actions required for improvement.

2.0 Background

- 2.1 The inspection by Office for Standards in Education, Children's Services and Skills (Ofsted) of Children's Services took place between 21 March and 1 April 2022. The inspection was conducted under the Inspection of Local Authority Children's Services (ILACS) Framework. This inspection was a short inspection lasting two weeks as we had previously been inspected by Ofsted in 2017 and found to be Good. Previously inspected authorities graded as Good overall receive a short inspection of two weeks as opposed to a standard four-week inspection.
- 2.2 The ILACS inspection covers the experience and progress of children who need help and protection, the experience and progress of children in care and care leavers, and the impact of leaders on social work practice with children and families. All these areas receive a separate grading with an additional grade for overall effectiveness.
- 2.3 The inspection team led by Her Majesty's Inspector (HMI) Andy Waugh undertook preparatory work for the first week commencing 21 March and were on site in Wolverhampton for the second week beginning 28 March.
- 2.4 As part of their preparatory work the inspectors read and analysed a wealth of information available to them through national data collection sources but also information that we sent to them as part of the ILACS framework requirements, including our Self Evaluation Framework (SEF). They also received case information from a selection of children's files recently audited in Wolverhampton.
- 2.5 During their second week on site, they chose a number of children and arrangements were made for them to meet with children's social workers and young person's advisors. Additionally, they met with key colleagues responsible for the management oversight and delivery of certain areas of practice.
- 2.6 An Education and a Regulatory inspector joined the team for one day They focussed on: the educational experience and progress of our children in care and the arrangements for children missing education; and the impact of our fostering service and adoption service (through our regional Adoption Agency Adoption@Heart).

3.0 Outcome of the Children's Service Inspection:

3.1 The table below shows the outcome of the inspection with gradings.

Judgement	Grade
The impact of leaders on social work practice with children and families	Outstanding
The experiences and progress of children who need help and protection	Good
The experiences and progress of children in care and care leavers	Good
Overall effectiveness	Good

- 3.2 These gradings demonstrate the overall improvement in services delivered to children and families in the city. Services for children and families in the City of Wolverhampton needing help and protection have improved and are now good.
- 3.3 There is outstanding practice in relation to care leavers, with services for children in care remaining good.
- 3.4 Since the previous inspection in 2017, inspectors noted that senior leaders have led a relentless drive to improve services, this has led to innovative social work practice. This work continues, underpinned by senior leaders' determination to keep improving the experiences and outcomes for all children in the city.
- 3.5 Wolverhampton are the second highest performing local authority in the wider West Midlands, second only to Telford and Wrekin and one of only two councils that has achieved 'Good' in the West Midlands Combined Authority (WMCA). 12 of the 14 wider West Midlands LA's and five of the seven WMCA councils have now been inspected under the current regime of Inspections of Local Authority Children's Services (ILACS).
- 3.6 Wolverhampton is the only local authority in the WMCA to achieve an 'Outstanding' in any of the sub-judgement categories.

Overall and sub-judgement ratings for West Midlands Combined Authorities

3.7 133 local authorities have now been inspected under the current ILACS framework, 15% have achieved 'Outstanding' and 39% have achieved a rating of 'Good'.

3.8 The summary of findings of this Wolverhampton's inspection are as follows:

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- This is underpinned by a strong corporate and political commitment through additional financial investment, which allows for the development of innovative projects that make a positive difference for children.
- The COVID-19 pandemic has not prevented the development of services and has enhanced relationships with partners.
- Children increasingly receive interventions through an embedded early help offer, which has reduced the number of children requiring statutory services.
- A mostly stable permanent workforce, along with manageable caseloads, enables positive relationships to be built with children and families.
- Several successful projects, such as Power2 and the House Project, have had a positive impact on children, diverting them away from risks of exploitation and supporting them to live independently.

4.0 Recognition of innovative, good and improved practice:

The experiences and progress of children who need help and protection

- 4.1 MASH24 (the Multi-Agency Safeguarding Hub) has effective systems for accepting and processing information to ensure accurate identification of risks to children and adults.
- 4.2 Children benefit from comprehensive early help assessments.
- 4.3 Children at risk of exploitation in Wolverhampton are benefiting from effective, prompt and careful consideration of their risks and needs and receive high-quality, intensive support to successfully reduce risk.
- 4.4 Children's assessments are analytical and effective in identifying risks and needs and management oversight of assessments is strong.
- 4.5 Children benefit from effective planning.
- 4.6 Social workers visit children frequently and build trusting relationships.
- 4.7 Disabled children have social workers who understand their needs well.

Experience and progress and children in care and care leavers

- 4.8 When children do come into care, they benefit from effective social work practice, supported by constructive management oversight and a clear focus on early permanence planning.
- 4.9 Children benefit from timely applications to the family court. Assessments, statements and care plans are of a good quality.
- 4.10 Social workers spend meaningful time with children and build positive relationships. Creative direct work with children enables them to understand their experiences.

- 4.11 Children are supported and encouraged to attend their reviews. Their voices help inform their plans, which helps them progress with their independence and aspirations.
- 4.12 Achieving permanence is a priority.
- 4.13 Children in care who are preparing for independence receive effective support to move on to independence.
- 4.14 Most children in care live in foster homes. Placement stability for children is strong. Children live with carers who understand their needs and promote their health and well-being.
- 4.15 Care leavers benefit from high-quality services that make them feel valued and listened to. They experience positive and trusting relationships with tenacious and highly dedicated personal advisers (YPAs). Young people consistently told inspectors that their YPAs are significant people in their lives, that their YPAs don't give up on them and that they could not have succeeded without them.
- 4.16 Young people in custody receive an excellent service through the Always Hope project.
- 4.17 Young people are introduced to their YPA at the age of 15 years and nine months, enabling the development of strong relationships.
- 4.18 The care leavers independent collective and the Children in Care Council are a force for change and are fully integrated into commissioning, tendering, strategic overview, the corporate parenting board and interviews for all social work posts at all levels.
- 4.19 Pathway plans are regularly updated. They include reference to the local offer to ensure that young people understand the support and entitlements available. PAs prioritise young people's culture and identity when understanding their experiences and worries, to bolster resilience and challenge discrimination. PWP's are written to, and in collaboration with, young people, with clear objectives and measures of success.
- 4.20 Most young people are engaged in education, employment or training (EET). This is against a backdrop of poverty, high local unemployment and the COVID-19 pandemic.
- 4.21 The housing offer and associated commissioning is an area of significant strength in Wolverhampton. In partnership with local providers, care leavers have a range of housing options, from carefully scrutinised supported accommodation and emergency options through to independent living.

The impact of leaders on social work practice with children and families

- 4.22 Leaders at all levels have continued to drive forward improvements, which has resulted in the delivery of consistently good-quality services that meet the needs of children and families.

- 4.23 Senior leaders show determination and insight into how they use learning to constantly challenge themselves and improve services. At a strategic and corporate level, children's needs are prioritised.
- 4.24 An aspirational transformation programme, supported by substantial financial investment, has been embedded and has improved services and practice. This is having a tangible impact on improving the experiences for vulnerable children and families.
- 4.25 Creative projects are now established services and are effective in supporting children and families at the right time. These include: the innovative MASH24; the multi-agency exploitation hub and Power2 team, helping to support and divert children away from being exploited; and the House Project, which is highly effective in supporting young people to successfully live independently.
- 4.26 Staff consistently described feeling valued and well supported by managers and senior leaders, including during the COVID-19 pandemic.
- 4.27 Leaders and managers continue to encourage the strength- and relationship-based restorative social work model and, as a consequence, there has been a significant reduction in the number of children requiring statutory interventions.
- 4.28 Senior leaders have been relentless in engaging partners effectively, which has resulted in strong and effective strategic partnerships.
- 4.29 Children, families and workers benefit from leaders who are committed to co-production and who incorporate their views when developing services. The Children in Care Council is routinely engaged in shaping new services.
- 4.30 Elected members are committed to and prioritise the needs of vulnerable children in the city.
- 4.31 Senior leaders know themselves very well and endeavour to meet the needs of children and families through high-quality effective services. They have a comprehensive understanding of the strengths and weaknesses of the service, which has led to a culture that is open to challenge and learning.

5.0 Five areas of improvement

- 5.1 The arrangements for tracking and monitoring children who are missing from education.
- 5.2 The recording of return home interviews to identify wider patterns and trends.
- 5.3 The virtual school should improve the quality of PEP's and address the persistent absence for some children in care.
- 5.4 The virtual school needs to ensure that children in care receive career advice earlier so they can make better informed decisions about their futures.
- 5.5 The quality of information provided to 16 and 17 year old homeless children about their rights and entitlements including to become looked after.

6.0 Next Steps

- 6.1 Action plan to progress recommendations to be submitted to Ofsted by 26 August 2022.
- 6.2 Progression of actions to be monitored by Children's Social Care Leadership team.

7.0 Reasons for decision(s)

- 7.1 Cabinet are asked to note the outcome of the inspection of our Children's Service, with overall effectiveness being grade as Good with outstanding and innovative areas of practice. It is strong external assurance that our children and young people in the city are being safeguarded and cared for.

8.0 Financial implications

- 8.1 There are no direct financial implications as a result of this report.
- 8.2 Any costs associated with the recommendations will be met from within existing budgets in Children's Services and Education.
[JG/31052022/X]

9.0 Legal implications

- 9.1 There are no direct legal implications arising from the report.
[TC/31052022/A]

10.0 Equalities implications

- 10.1 The work of children's services is to provide the right level of support to children young people and their families at the right time, strengthening opportunities for children to live within their own family whilst supporting improved outcomes for children and young people.
- 10.2 The Ofsted report reflects positively through innovation and good practice that children are receiving the right support to meet their individual needs.
- 10.3 Inspectors noted that for children referred through MASH24 their identity, including culture, race, and how identity applies to presenting concerns, is routinely considered. They also noted that unaccompanied asylum-seeking children, who are supported into accommodation are wherever possible placed in placements that meet their religious and cultural needs.
- 10.4 Inspectors found that disabled children have social workers who understand their needs well and work creatively to seek their views using a variety of tools to support children's communication needs. Where disabled children are at risk of harm, risks and needs are well understood and responded to effectively.

11.0 All other implications

- 11.1 There are no other implications to be considered.

12.0 Schedule of background papers

12.1 There are no background papers.

13.0 Appendices

13.1 Appendix 1: Inspection of City of Wolverhampton Local Authority Children's Services.

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Inspection of City of Wolverhampton local authority children's services

Inspection dates: 28 March to 1 April 2022

Lead inspector: Andy Waugh, Her Majesty's Inspector

Judgement	Grade
The impact of leaders on social work practice with children and families	Outstanding
The experiences and progress of children who need help and protection	Good
The experiences and progress of children in care and care leavers	Good
Overall effectiveness	Good

Services for children and families in the City of Wolverhampton needing help and protection have improved and are now good. There is some outstanding practice in relation to care leavers and overall services for children in care have been sustained. Since the previous inspection in 2017, senior leaders have led a relentless drive to improve services, which has led to innovative social work practice. This work continues, underpinned by senior leaders' determination to keep improving the experiences and outcomes for all children in the city.

A strength-based practice model is supporting social workers to make good decisions for children, which enables the majority of children to receive the right help at the right time. This is underpinned by a strong corporate and political commitment through additional financial investment, which allows for the development of innovative projects that make a positive difference for children.

While the COVID-19 pandemic has presented the local authority with challenges and pressures, it has not prevented the development of services and the enhancement of relationships with partners. Children increasingly receive interventions through an embedded early help offer, which has reduced the number of children requiring statutory services. A mostly stable permanent workforce, along with manageable caseloads, enables positive relationships to be built with children and families. Several successful projects, such as Power2 and the House Project, have had a

positive impact on children, diverting them away from the risks of exploitation and providing them with support to live independently.

What needs to improve?

- The arrangements for tracking and monitoring children who are missing from education.
- The recording of return home interviews to identify wider patterns and trends.
- The virtual school should improve the quality of PEP's and address the persistent absence for some children in care.
- The virtual school needs to ensure that children in care receive career advice earlier so they can make better informed decisions about their futures.
- The quality of information provided to 16- and 17-year-old homeless children about their rights and entitlements including to become looked after.

The experiences and progress of children who need help and protection: good

1. Children receive the right help at the right time. The multi-agency safeguarding hub (MASH24), which is a combined MASH and emergency duty team, provides a strong effective service that applies thresholds consistently well and directs families to the appropriate service in a timely way, including out of hours. MASH24 has effective systems for accepting and processing information to ensure accurate identification of risks to children and adults.
2. Managers have oversight at the point of receiving the contact, and the information is risk rated, with guidance for next steps. Partners share information in a timely way, which enables social workers to analyse all the information and make appropriate recommendations for future actions. Identity, including culture, race and how identity applies to presenting concerns, is routinely considered. Overall, management oversight is consistently recorded, with the correct thresholds applied. Children's needs are understood and signposted to early help services when appropriate. However, the gaining of parental consent or the rationale for overriding of consent are not consistently recorded.
3. Children benefit from comprehensive early help assessments, using family history to understand needs. However, analysis in assessments is not strongly focused on identifying risks and past concerns to inform planning. The views of children and parents are evident throughout the assessments. Early help plans and actions identify outcomes to help support children and parents to improve relationships and reduce risks. The number of early help interventions continues to increase, with a small minority needing to be stepped up to social care, indicative of successful interventions and outcomes for children at the early help level.

4. Effective domestic abuse triage arrangements are taking place daily. Initial screening is completed by experienced police officers to ensure that children at the appropriate level of risk are referred through to MASH24.
5. Children at risk of exploitation in Wolverhampton are benefiting from effective, prompt and careful consideration of their risks and needs through the daily exploitation meeting held in the Exploitation Hub. Child-exploitation screening tools are completed and appropriately used by partners alongside multi-agency referral forms. Children receive a swift response and are signposted to targeted support services or escalated to multi-agency child exploitation meetings when higher risk is identified.
6. Where concerns escalate for children, strategy meetings are held in a timely way. They are well attended by partners, with information shared leading to informed decision-making. The outcomes of strategy meetings are well recorded, with a clear rationale for next steps and actions that address risks to children.
7. Children's assessments are analytical and effective in identifying risks and needs. Managers provide strong oversight when assessments are allocated. They are focused on reviewing risks and provide clear direction about expectations and timescales. This means that children receive support at the right time. Assessments are updated to re-evaluate current needs and risks.
8. Children benefit from effective planning that addresses increased needs and reduces risks. Most plans include children's wishes and feelings. In the majority of child-protection and child-in-need plans, there is evidence of effective partnership working that contributes to the reduction of risk or needs for children.
9. Social workers visit children frequently in line with children's plans, to build trusting relationships and further understand their experiences. Through creative direct work, social workers gain insight into children's interests and abilities, and have a good understanding of their wishes and feelings.
10. In most cases, child-protection plans are effective at reducing risks for children. Plans are restorative and focused on the impact of actions on improving children's circumstances. The majority of children's plans are progressed in a timely way. Actions are SMART (specific, measurable, achievable, relevant and time-bound) and consistently reviewed and updated at well-attended monthly core group meetings.
11. The pre-proceedings process of the Public Law Outline is used effectively when risks to children are not diminishing. Pre-proceedings work is supported by skilled in-house Parent Assessment Manual assessors, promptly commissioned cognitive assessments and family group conferences, resulting in a significant number of children remaining with their family. Where concerns continue to escalate, early permanence is achieved for most children through timely care proceedings that have been fully informed by the completion of strong assessments in pre-proceedings.
12. Children at risk of exploitation and their families receive high-quality, intensive support to successfully reduce risk. Those children at higher risk of exploitation

and wider vulnerabilities receive high-quality support packages through the Power2 service and associated resources. This is helping Wolverhampton children to remain safely with their families. Performance-management arrangements are strong, supporting mapping activity and hotspot identification, and the tracking of individual children's circumstances.

13. Disabled children have social workers who understand their needs well and work creatively to seek their views using a variety of tools to support children's communication needs. Where disabled children are at risk of harm, risks and needs are well understood and responded to effectively.
14. Children who are 16 or 17 years old and present as homeless are supported to find alternative suitable accommodation. However, they are not routinely and explicitly made aware of their rights and entitlements, meaning that they may not be fully aware of their options when making choices and decisions about their accommodation and care arrangements.
15. Where children are missing from education, the local authority carries out a range of checks to try to locate missing pupils as quickly as possible. However, on occasions, for some children who cannot be located, managers do not consistently take additional steps to inform key agencies such as Border Force or the police. In response to this shortfall, senior managers have strengthened the service by committing dedicated resources to ensure that risks to missing children are fully explored.
16. The number of children who are electively home educated has risen significantly. Managers have strong oversight of any parental decision for a pupil to become electively home educated, to assure themselves of the welfare of the child.

The experiences and progress of children in care and care leavers: good

17. Children in Wolverhampton are supported to remain with their families when it is safe to do so. Strong edge of care services, such as the Star Project and Power2, complete effective work with children and families that makes a positive difference. As a consequence, children only come into care when it is in their best interests.
18. When children do come into care, they benefit from effective social work practice, supported by constructive management oversight and a clear focus on early permanence planning. This includes unaccompanied asylum-seeking children, who are supported into accommodation that, wherever possible, meets their religious and cultural needs.
19. Children benefit from timely applications to the family court. Assessments, statements and care plans are of a good quality. Inspectors were informed by both the judiciary and the Children and Family Court Advisory and Support Service of the positive impact of timely care proceedings and the consistently good-quality work that has resulted in the right outcomes for children.

20. Social workers spend meaningful time with children and build positive relationships. Creative direct work with children enables them to understand their experiences. Children are helped to understand their own journeys into and through care, through sensitive later-life letters and life-story work.
21. Where children are moving to adoptive placements, introductions are carefully planned and supported by inventive practice tools to help to prepare children. Children's records are sensitively written and include their views, strengths and abilities. Should they wish to read their records at a later stage, children would understand why decisions were made about their care.
22. Children's assessments are regularly updated to reflect changes in circumstances. Care plans are reviewed, with additional quality assurance checks by independent reviewing officers (IROs) to monitor children's progress. Clear plans for permanence are formed as early as possible, including foster to adopt placements and other family members.
23. Children are supported and encouraged to attend their reviews. Their voices help inform their plans, which helps them progress with their independence and aspirations. IROs write reviews using accessible and child-friendly language, with some recommendations that are underpinned by research to enhance understanding of the reasoning and importance of achieving actions.
24. Achieving permanence is a priority for both children and young people staying put with their former foster carers. Children benefit from planning for their futures at the earliest opportunity, to enable a smooth and supportive transition to adulthood.
25. Children in care who are preparing for independence receive effective support to move on to independence from foster care and children's homes. The House Project enables children to gain independence skills, including financial and practical support, through a team approach to testing the young person's capacity before moving on to permanent accommodation.
26. Most children in care live in foster homes. Placement stability for children is strong. Children live with carers who understand their needs and promote their health and well-being, with referrals to specialist services when needed. Children's emotional well-being is supported through access to therapy and by specialist support for foster carers.
27. Foster carers feel welcomed and supported by the local authority. Throughout the COVID-19 pandemic, the recruitment and support of foster carers have been sustained. The capacity of foster carers means there continues to be more children living with in-house carers than with independent foster carers. However, there are shortfalls in the quality of some foster carer assessments, the timeliness of foster carer reviews and the formal supervision of staff. Senior leaders cannot be assured that these placements continue to be suitable for children where this is the case. There are firm plans to tackle the drift in this area of the service.

28. Children's academic needs are mostly met by the virtual school. The use of pupil premiums is successful in enhancing children's education. Children who live outside Wolverhampton receive support equal to that of their peers. Children's attendance at school is generally good but the persistent rate of absence of some children is too high, meaning some children are missing significant parts of their education. The quality of personal education plans is variable, with managers not having a concerted grip on the overall quality assurance. The number of care leavers aged 19 to 21 years who are not in education, employment or training has recovered since the initial stages of the pandemic to be in line with the national average. The virtual school is becoming more aspirational in seeking to close the gap between children in care and their peers.
29. The majority of children in care who are at risk of harm as a result of going missing and exploitation receive a proactive response from social workers based on their individual assessments of risk. Return home interviews are mostly timely and comprehensive. They clearly capture information about children's safety and worries, to enable review and analysis of whether risk is reducing or escalating. Social workers frequently visit children after missing-from-care episodes to understand their experiences and to help children avoid attempts to exploit them. However, when children refuse a return home interview, it is not always evident why this is and what efforts have been made to understand and help reduce risks to individual children and to gather wider intelligence and learning.
30. Adoption is considered carefully and promptly for all children who are unable to return home to their birth families and who need a permanent alternative. Senior managers, through regular oversight, assure themselves that children receive an effective service from the regional adoption agency, Adoption@Heart.
31. A very small number of vulnerable disabled children are currently placed in homes registered only with the Care Quality Commission, with plans for the placements to be registered with Ofsted. Senior managers have oversight of these placements and there is increased visiting by social workers. Persistent efforts are made to find registered settings. A small number of older (post-16) children are placed in unregulated settings, which are meeting their needs.
32. Care leavers benefit from high-quality services that make them feel valued and listened to. They experience positive and trusting relationships with tenacious and highly dedicated personal advisers (PAs). Young people consistently told inspectors that their PAs are significant people in their lives, that their PAs don't give up on them and that they could not have succeeded without them, referring to them as 'like parents to me'. Young people in custody receive an excellent service through the Always Hope project, which draws on the probation and prison service to support young people returning to the community.
33. Young people are introduced to their PA at the age of 15 years and nine months, enabling the development of strong relationships. A seamless transition provides effective support into adulthood. The commitment of PAs to these young people has involved supporting them with appointments, and social events at weekends and evenings and responding to both positive developments and crises in young people's lives with equal vigour and attention.

34. Care leavers are consulted on the strategic direction of the local authority, and they are pivotal to key decisions. The care leavers independent collective and the Children in Care Council are a force for change and are fully integrated into commissioning, tendering, strategic overview, the corporate parenting board and interviews for all social work posts at all levels.
35. Young people's successes are celebrated at an individual level, for example through PAs and monthly children in care and care leavers awards, and at an annual I Award celebration of achievement covering children in care. Young people told inspectors that cultural activities, including the arts, music and self-identified interests, could be better funded and more encouraged by the local authority.
36. The majority of care leavers are living in safe accommodation that meets their needs. However, for the small number of care leavers who are in unsuitable accommodation, PAs increase their visiting patterns and managers have increased oversight to proactively support young people to find more permanent living arrangements.
37. The housing offer and associated commissioning is an area of significant strength in Wolverhampton. In partnership with local providers, care leavers have a range of housing options, from carefully scrutinised supported accommodation and emergency options through to independent living. The Wolverhampton iteration of the Housing Project has successfully supported three cohorts of young people into secure tenancies through intensive, and then tapered, support. This is repeated if young people are deemed not ready, rather than it being seen as a failure.
38. Young people's pathway plans (PWPs) are regularly updated when needs and circumstances change. They include multi-agency input and reference to the local offer to ensure that young people understand the support and entitlements available. PAs prioritise young people's culture and identity when understanding their experiences and worries, to bolster resilience and challenge discrimination. PWPs are written to, and in collaboration with, young people, with clear objectives and measures of success. For young people who are unaccompanied asylum seekers, a specific part of the PWP addresses legal status and contingencies if legal immigration status is denied. Safeguarding risks are considered and addressed well, including when care leavers are parents.
39. Most young people are engaged in education, employment or training (EET). This is against a backdrop of poverty, high local unemployment and the COVID-19 pandemic. The EET figures for 16- to 17-year-olds and 18- to 21-year-olds have either stabilised or improved. Young people are supported by dedicated EET advisers with strong local connections, guaranteed interviews for the 10 apprenticeships in the local authority, a thorough preparation for independence programme and repeated attempts by PAs to find the right opportunities for young people that suit their skills and abilities.

The impact of leaders on social work practice with children and families: outstanding

40. Since the inspection in 2017, leaders at all levels have continued to drive forward improvements, which has resulted in the delivery of consistently good-quality services that meet the needs of children and families. Senior leaders show determination and insight into how they use learning to constantly challenge themselves and improve services. At a strategic and corporate level, children's needs are prioritised. An aspirational transformation programme, supported by substantial financial investment, has been embedded and has improved services and practice. This is having a tangible impact on improving the experiences for vulnerable children and families. Creative projects are now established services and are effective in supporting children and families at the right time. These include: the innovative MASH24, which provides a consistent service every day of the year; the multi-agency exploitation hub and Power2 team, helping to support and divert children away from being exploited; and the House Project, which is highly effective in supporting young people to successfully live independently.
41. The unforeseen challenges and pressures brought on by the pandemic did not prevent the local authority from ensuring that the needs of vulnerable children continued to be prioritised. Leaders and managers across the service continued to encourage the strength- and relationship-based restorative social work model and, as a consequence, there has been a significant reduction in the number of children requiring statutory interventions.
42. Senior leaders have been relentless in engaging partners effectively, which has resulted in strong and effective strategic partnerships that have taken forward integrated approaches to MASH24 and early help intervention through the Strengthening Families hubs. The social workers in schools project has demonstrated a commitment to working closely with education partners, to support children before statutory services are required. In addition, leaders have responded to the findings of the recent inspection of the local area services for children and young people with special educational needs and/or disabilities (SEND), with virtual school leaders working with SEND colleagues to ensure better oversight of education and health plans, to minimise the impact on looked after children.
43. Children, families and workers benefit from leaders who are committed to co-production and who incorporate their views when developing services. A corporate parenting panel challenges the views of leaders and enables the voices of children to be heard. Elected members are committed to and prioritise the needs of vulnerable children in the city. The Children in Care Council is routinely engaged in shaping new services, for example the improved supported accommodation provision.
44. Senior leaders know themselves very well and endeavour to meet the needs of children and families through high-quality effective services. They have a comprehensive understanding of the strengths and weaknesses of the service, which has led to a culture that is open to challenge and learning. This has led to

a high level of consistent, strong social work practice being embedded across most service areas. During the inspection, leaders responded quickly to areas of the service that need improving, for example pledging dedicated staff to improve the service to children who are missing from education.

45. The local authority commissioning hub has responded creatively to the current and future demands on placement sufficiency. Detached youth work, outreach, an emotional well-being service and Power2 key workers have been commissioned to protect children and prevent care from being necessary, in a bid to shift resources to where families will benefit the most.
46. Children in care and care leavers benefit from proactive joint commissioning with partners that has provided a wide range of internal and external housing options. A detailed and comprehensive strategy is underpinned by meaningful consultation with young people and is shared with regional colleagues to drive improvements beyond the borders of the local authority.
47. Regular performance and quality assurance reports and meetings focus on compliance but also on what the findings indicate about the experiences of children. This informs an approach to audit priorities and practice improvement. Quality assurance arrangements are strong, with a comprehensive approach to learning from audits. There are a range of effective processes. Learning is shared with staff through 'learning' bulletins and regular practice weeks. However, the evidence of follow up on actions and 'closing the loop' on individual cases is not yet consistent.
48. Staff consistently described feeling valued and well supported by managers and senior leaders, including during the COVID-19 pandemic. Social workers are positive about the range and quality of training opportunities that help them develop their practice. Those staff who are newer and those with less experience are positive about their induction and the higher levels of training and support they receive from managers at all levels of the service.
49. Overall, stability of staffing is a strength and is a positive factor in the ability to maintain high-quality services for children. Nevertheless, managers remain committed to the recruitment and retention of staff. The local authority promotes its various pathways for current staff to become qualified, along with 'growing your own' through an effective assessed and supported year in employment programme. Where appropriate, unqualified staff are encouraged to consider a social work qualification, through an apprenticeship model. As a result, the majority of children benefit from stable and strong relationships with their social workers, who have manageable caseloads that enable them to strive to carry out quality work with children to improve children's circumstances and experiences.

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Store Street
Manchester
M1 2WD

T: 0300 123 1231
Textphone: 0161 618 8524
E: enquiries@ofsted.gov.uk
W: www.gov.uk/ofsted

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CITY OF WOLVERHAMPTON COUNCIL	Cabinet 15 June 2022
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Report title	Our Commitment to All Age Carers	
Decision designation	AMBER	
Cabinet member with lead responsibility	Councillor Linda Leach Adults	
Key decision	Yes	
In forward plan	Yes	
Wards affected	All Wards	
Accountable Director	Becky Wilkinson, Director of Adult Services	
Originating service	Adult Social Care	
Accountable employee	Sandra Ashton Jones Tel Email	Head of Service 01902 555322 Sandra.ashton- jones@wolverhampton.gov.uk
Report to be/has been considered by	Joint Leadership Team Strategic Executive Board	12 May 2022 31 May 2022

Recommendations for decision:

The Cabinet is recommended to:

1. Approve and endorse Our Commitment to All Age Carers.
2. Agree that the Health and Well-being Board consider Our Commitment to All Age Carers and oversee the implementation of the plan.

Recommendation for noting:

The Cabinet is asked to note:

1. That the priorities set out in Our Commitment to All Age Carers have been developed through engagement and conversations with carers and professionals in the city.

1.0 Purpose

- 1.1 The purpose of this report is to seek approval of Our Commitment to All Age Carers 2022 at Appendix 1.

2.0 Background

- 2.1 A Carer is defined as someone who cares, unpaid, for a friend or family member who due to illness, disability, a mental health problem or an addiction cannot cope without their support. Carers play a vital role in society, not only in providing care to a person, but also helping the health and social care system meet a rising demand in care needs. Carers help improve quality of life for the individual requiring care, families and friends.
- 2.2 In Wolverhampton, 27,000 adults and 500 young people identified themselves as a carer in the 2011 census. There are 5,324 people in Wolverhampton who are currently known to the Council to care for an ill, frail or disabled family member, friend or partner. It is estimated that carers save the economy £132 billion per year, an average of £19,336 per carer.
- 2.3 Local authorities have mandatory duties under the Care Act 2014, which includes providing an adult carer with an assessment to identify their own needs, and if thresholds are met, to provide access to a range of eligible support and provision. The Care Act also requires that an assessment, of a young carer needs, is undertaken if it considers that they are likely to have needs for support after becoming 18 and that the assessment would be of significant benefit.
- 2.4 The Children and Families Act 2014 extends the right to an assessment of needs to support all young carers under the age of 18 regardless of who they care for, what type of care they provide or how often they provide it. All local authorities in England must assess whether a young carer within their area has needs for support and, if so, what those needs are.
- 2.5 Strategic direction around carers support has been provided through the City's Joint All Age Carer Strategy 2016-2020. The strategy was due to end 2020 and a Carer Strategy Group had been set up to review progress of the deliverables within Our Commitment to All Age Carers. Unfortunately, due to the Covid-19 pandemic it was agreed that this work would be temporarily paused and was recommenced in September 2021.

3.0 Progress, options, discussion, etc.

- 3.1 To determine the priorities of Our Commitment to All Age Carers, a comprehensive eight-week consultation programme was carried out involving an online survey, postal questionnaires, and face to face meetings with young carers aged under 18, young adult carers aged between 18 and 24, adult carers aged 25 and over, parent carers and professionals. A further seven-week consultation programme was then carried out to determine the actions that will be taken to implement the priorities.

- 3.2 The Council's Public Health Service completed a Joint Service Needs Assessment (JSNA) to inform the revision of the plan and broke down the data into the following three areas:
- Adults
 - Younger Adults
 - Children
- 3.3 The JSNA describes the profile of carers in Wolverhampton, assesses the uptake of services aiming to support carers and reviews the academic literature about how carers can be better supported to carry out their caring role, whilst also maintaining their health and wellbeing.
- 3.4 Aligned with the Government's vision for reforming adult social care in England, the refreshed Council Plan Our City: Our Plan for 2022 and the redesign of Adult Services, Our Commitment to All Age Carers 2022 builds on the work driven by the previous All Age Carer Strategy, acknowledging that the needs and priorities of carers have been impacted by the Coronavirus pandemic.
- 3.5 Our Commitment to All Age Carers identifies five priorities for carers and sets out how the Council and partners will seek to achieve the priorities. The five priorities are:
- Employment and financial wellbeing.
 - Services and systems that work for carers.
 - Support for young carers.
 - Recognising and supporting carers in the wider community.
 - Building research and evidence to improve outcomes for carers.
- 3.6 The following values will underpin all the work undertaken to achieve the priorities:
- Co-production – working with carers, their families, and other partners, using each partner's knowledge and experience to help plan, design and develop services for carers.
 - Continuous improvement – increasing the quality of services for carers through review and change.
 - Connecting with communities – promoting resilient, inclusive communities, helping to reduce isolation, and building connections that enable carers to support each other.
 - Fair and equal – addressing the inequalities experienced by carers.
 - Safeguarding – ensuring that carers and the person they care for are safe.

- 3.7 Accompanying Our Commitment to All Age Carers will be an implementation plan detailing what action will be taken to implement the priorities for carers. The implementation of the plan will be co-produced and overseen by a steering group made up of various stakeholders including carers. As we emerge from the Covid-19 pandemic we have ambitious plans to develop our offer to carers in the city, we will therefore keep Our Commitment to All Age Carers under regular review.

4.0 Evaluation of alternative options

- 4.1 Option one would be to make no change to the existing strategy. This would result in the City of Wolverhampton Council remaining with a strategy that is no longer in date.
- 4.2 Option two would be to not have any Commitment to All Age Carers leaving the Council at risk of failing to meet its statutory requirements.
- 4.3 Option three would be to update the existing strategy with the proposed plan Our Commitment to All Age Carers in Appendix 1. This evidences the Council's commitment to supporting carers of all age and also the Council's commitment to co-production with carers and partner agencies in the city.

5.0 Reasons for decision(s)

- 5.1 Option three is the preferred option. The reason for the decision to approve and endorse Our Commitment to All Age Carers is to meet the Council's statutory duties as part of the Care Act 2014 and the Children and Families Act 2014 and also align with the priorities of Our City: Our Plan 2022.
- 5.2 Consultation with carers of all ages and other stakeholders has been undertaken throughout the development of the plan through focus groups, postal questionnaires and online surveys. Our Commitment to All Age Carers is clear, ambitious and has been co-produced with carers in the city.

6.0 Financial Implications

- 6.1 There are no direct financial implications attached to the Our Commitment to All Age Carers , as the provision is covered from within existing budgets.
[MK/27052022/R]

7.0 Legal Implications

- 7.1 Our Commitment to All Age Carers demonstrates the Council's response to its statutory duties in accordance with the Care Act 2014 and the Children and Families Act 2014.
[SZ/26052022/P]

8.0 Equalities implications

- 8.1 Equality implications have been carefully considered, a key purpose of Our Commitment to All Age Carers is to mitigate any equalities that carers face. A full Equality Analysis has been undertaken.
- 8.2 As part of performance reporting, there is ongoing work to ensure that where possible, data is collected and able to be analysed by protected characteristics, to ensure that the Council is meeting its responsibilities and commitments in relation to fairness and equality.

9.0 All other implications

- 9.1 Our Commitment to All Age Carers is aligned to the Council's Digital Wolves and Health and Wellbeing plans and responds to the impact faced by carers from the Covid-19 pandemic.

10.0 Schedule of background papers

- 10.1 Joint All Age Carer Strategy 2016-2020

11.0 Appendices

- 11.1 Appendix 1: Our Commitment to All Age Carers

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Our Commitment to All Age Carers

2022

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Foreword

In Wolverhampton, there are 27,000 adults and 500 young people who identified as a carer in the 2011 census. There are 5,324 people in Wolverhampton who are known to the Council to care for an ill, frail or disabled family member, friend or partner. This shows how many hidden carers there are in the City.

Carers play a vital role in society, not only in providing care to a person, but also helping the health and social care system to meet rising demand in care needs. Carers help to improve quality of life for the people they care for, family and friends. It is estimated that nationally, carers save the economy £132 billion per year, an average of £19,336 per carer.

Research has shown that for most people the experience of caring is rewarding, and many carers manage with help from their family, friends and communities. Some might need additional help and ask the Council, the NHS or both for support.

As part of the development of this plan, which sets out our commitment to carers of all ages living in Wolverhampton and sets out the strategic direction for support for carers, extensive consultation has been carried out with partners including, most importantly, carers, the experts by experience. The feedback, knowledge and experience of participants has shaped Our Commitment to All Age Carers plan.

Our Commitment to All Age carers describes the Council's priorities for carers and the cross-cutting values that will underpin all the work undertaken to implement it. Implementation will be co-produced by a steering group with representation that reflects the wide range of partners, all with a commitment to the provision of support for carers that enables them to maintain their own health and wellbeing while carrying out their caring role.

Councillor Linda Leach
Cabinet Lead for Adult Social Care

National context

The Government's vision for carers ¹ is that they will be universally recognised and valued as being fundamental to strong families and stable communities. Support will be tailored to meet individuals' needs, enabling carers to maintain a balance between their caring responsibilities and a life outside caring, while enabling the person they support to be a full and equal citizen.

In 2018, the Government published the Carers Action Plan ², which builds on the rights for carers that were introduced by the Care Act 2014 ³ and Children and Families Act 2014 ⁴ and sets out the practical actions required by the Government and partners for carers to:

- be recognised and valued.
- have access to information and support to provide the best care they can.
- be helped to balance their caring responsibilities with their own employment.
- preserve their personal health and wellbeing.

Furthermore, the Government has committed to social care reform in England, including taking steps to ensure that carers have the support, advice and respite they need.

The carer population is not static. Each year millions of people take on caring responsibilities whilst caring comes to an end for millions of other carers as the person they care for recovers, increases independence, moves into accommodation with care or passes away. Three in five people will be carers at some point in their lives ⁵.

In 2019, using population projections from the ONS and polling by Carers UK, it is estimated that 8.8 million adults in the UK were carers ⁶.

Carers Trust 2020 ⁷ found that there are an additional 4.5 million unpaid carers in the UK since the coronavirus outbreak. In addition, 40% of young carers and 59% of young adult carers felt their mental health is worse since the Coronavirus outbreak.

Carers UK 2020 ⁸ found that 70% of unpaid carers they consulted had experienced negative impact on physical and mental health because of their caring responsibilities.

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1. UK Government (2010) Recognised, Valued and Supported: Next Steps for the Carers Strategy. Available at [Recognised, valued and supported: Next steps for the Carers Strategy \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/264261/Recognised_valued_and_supported_Next_steps_for_the_Carers_Strategy.pdf).
 2. UK Government (June 2018) Carers Action Plan 2018 - 2020 Supporting carers today. Available at [Carers Action Plan 2018 to 2020: Supporting carers today \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/684261/Carers_Action_Plan_2018_to_2020_Supporting_carers_today.pdf).
 3. UK Government (2014) Care Act 2014. Available at https://www.legislation.gov.uk/ukpga/2014/23/pdfs/ukpga_20140023_en.pdf.
 4. UK Government, (2014) Children and Families Act 2014. Available at https://www.legislation.gov.uk/ukpga/2014/6/pdfs/ukpga_20140006_en.pdf.
 5. Carers UK (2019) Policy Briefing August 2019 Facts About Carers. Available at [Facts_about_Carers_2019.pdf \(carersuk.org\)](https://carersuk.org/images/Facts_about_Carers_2019.pdf).
 6. Carers UK (2019) Juggling work and care. Available at [Juggling work and unpaid care - Carers UK](https://carersuk.org/images/Juggling_work_and_unpaid_care_-_Carers_UK.pdf).
 7. Carers UK (2020) Carers Week 2020 Research Report: The rise in the number of unpaid carers during coronavirus (Covid-19) outbreak. Available at https://www.carersuk.org/images/CarersWeek2020/CW_2020_Research_Report_WEB.pdf.
 8. Carers Trust (2020) Steep decline in mental health of young carers and young adult carers following Coronavirus outbreak. Available at <https://carers.org/news-and-media/news/post/51-steep-decline-in-mental-health-of-young-carers-and-young-adult-carers-following-coronavirus-outbreak>.

Carers UK 2019 ⁹ showed that 7% of carers felt their caring responsibility had negatively impacted their work. This decreased from 10% in 2013 which may indicate employers' policies to support carers are having a positive impact.

The Children's Society 2022 ¹⁰ reports that 800,000 young carers aged five to 17 care for an adult or family member in England. Twenty-seven percent (27%) of young carers aged 11-15 miss school. Young carers are often hidden - 39% said nobody in their school was even aware of their caring responsibilities.

Carers UK 2021 ¹¹ reported that carers who provide more hours of care per week were much more likely to be struggling financially. Whilst 84% of those providing under 10 hours a week said they can afford their bills without struggling, fewer (77%) of those caring for up to 35 hours a week said the same, and only around half (56%) of those providing more than 35 hours of care per week can afford their bills.



9. Carers UK (2019) Juggling work and care. Available at [Juggling work and unpaid care - Carers UK](#).

10. The Children's Society (2022)

<https://www.childrensociety.org.uk/what-we-do/our-work/supporting-young-carers/facts-about-young-carers>.

11 Carers UK (2021) State of Caring 2021 A snapshot of unpaid care in the UK. Available at [State of Caring 2021 report - Carers UK](#).

Local context

We are committed to supporting all our Carers in Wolverhampton and our plan for how we build on the support we have in place and improve our offer to all carers starts with this document.

Our Commitment to All Age Carers will contribute towards the delivery of the refreshed Our City, Our Plan which re-confirms the Council's commitment to supporting carers by making carers a specific focus within the priorities strong families where children achieve their full potential and fulfilled lives with quality care for those who need it.

To inform the development of our commitment, Public Health conducted a needs assessment. The assessment describes the profile of carers in Wolverhampton, assesses the uptake of services aiming to support carers and reviews the academic literature. These are the findings.

There are 5,324 adult carers registered with a Wolverhampton GP. Of these, around 230 are young adult carers, defined as aged 18 to 24 with caring responsibilities.

There are 95 young carers, defined as children under 18 with caring responsibilities, registered with a Wolverhampton GP.

The number of carers increased by 25% between 2019 and 2020 and by a further 24% between 2020 and 2021.

Most parent carers care every day, with 6% caring every other day and 2% caring weekly. Four percent care as required, depending on when other family members can also care.

Over two thirds (68%) of adult carers are female which is above the national average of 58%. There is an equal amount of female and male young carers.

The ethnicity profile of all age carers is representative of the general population of Wolverhampton.

More than half of all carers have one or more long term condition which means they have their own health needs that require management, as well as managing their caring role.

36% of adult carers in Wolverhampton have as much social contact as they would like, compared to 32.5% nationally.

People caring for someone living with dementia in Wolverhampton report a quality-of-life score of 7.3 which is the highest score in the Black Country.

The Council's quarterly carers newsletter is sent electronically to 1,380 people and a paper version is sent to 2,113 people. A further 750 copies are distributed at events and through partner organisations.

3,016 carers have an emergency card, provided to offer reassurance should they suddenly be taken ill and to identify that they have a caring role.

Eighty-nine carers use the home-based respite service, enabling them to have a break from their caring role and to support their wellbeing.

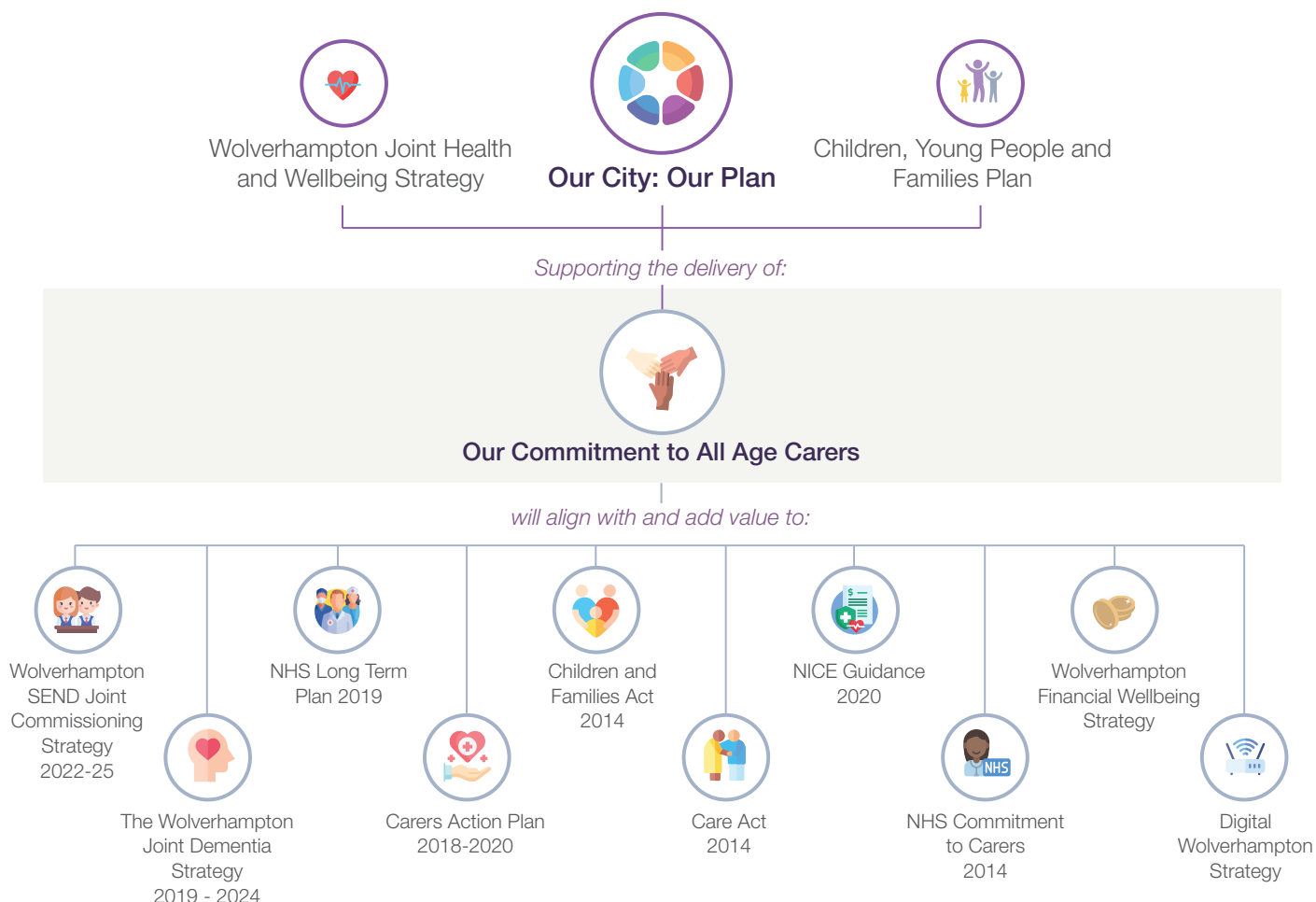
The Young Carers Service was supporting 141 young carers in July 2019, rising by 91% (128 young carers) to 269 young carers in December 2021.

The vision

Aligned with the Government's vision for reforming adult social care in England, the refreshed Council Plan for 2022 and the redesign of Adult Services, this plan builds on the work driven by the strategy before it, acknowledging that the needs and priorities of carers have been impacted by the Coronavirus pandemic. It focusses on the main five priorities identified by partners; employment and financial wellbeing, services and systems that work for carers, support young carers, recognising and supporting carers in the wider community and building research and evidence to improve outcomes for carers.

The council is committed to working in partnership across the city to deliver the priorities, working with partners to connect people, places and communities to unlock potential and create change. Opportunities for partners to co-design and co-produce will be provided, developing long-term resilience and capacity to tackle inequalities. The development of a new community relationship will help to eliminate barriers and develop networks between carers and other partners in the city. We recognise that as we relight our city after the pandemic that our offer to carers will need to evolve and grow. We are committed to continuously listening to carers of all ages in order to strengthen our offer in line with our ambitious plans for the city. This plan will be regularly reviewed and refreshed.

The following chart shows the national and local policy and guidance links to Our Commitment to All Age Carers.



What people have said

To determine the priorities of Our Commitment to All Age carers, a comprehensive eight-week consultation programme was carried out involving young carers aged under 18, young adult carers aged between 18 and 24, adult carers aged 25 and over, parent carers and professionals. A further seven-week consultation programme was then carried out to determine the actions that will be taken to implement the priorities. This is a summary of what people said.

Some carers do not like to be **identified** as a carer and choose not to be. Sometimes this is due to stigma. Others do not recognise themselves as a carer; they are someone's relation or friend. Where they are both, they want their relationship or friendship to be maintained, not to become only a carer. Better identification of hidden carers is required.

There are many types of carer, including young carers aged under 18, young adult carers aged 18 to 24, adult carers aged 25 and over, parent carers including for children with a special educational need or disability (SEND), sibling carers and sandwich carers (who have caring responsibilities for different generations e.g. children and parents). Carers each have **unique circumstances and needs**, some of which are niche and/or complex, that are individual to them, and service planning should reflect this.

Carers wish for a **whole family approach**, meaning support is provided to carers in the context of their families. When carers needs are being identified, the impact of their caring responsibilities on the whole family should be considered, and support personalised in accordance with this.

The service offer changed during the Coronavirus pandemic. Due to infection prevention control measures, less face-to-face services were available and there was an increased virtual offer. A **mixed offer** that uses both face-to-face and virtual options became normal. The changes that worked well should shape future provision, including the innovative use of technology, teamworking, peer support and keeping people safe from infection. Care should be taken to maintain the right balance to avoid creating loneliness and isolation. How services are provided should not exclude carers who are in digital poverty.

Carers experience problems with their **emotional wellbeing** because of their caring role. Problems include stress and worry due to thinking about the cared for person's health and future, constant anxiety about the person they care for, isolation and loneliness due to having less time to work, socialise and pursue hobbies, money worries due to reducing hours of work and care, medical and travel costs, lack of sleep due to caring during the night or worry, guilt, frustration and anger about their situation, low self-esteem, losing confidence in their ability to do anything except care and depression due to the challenges faced. Carers would like a choice of group and one-to-one interventions. Some carers would like to choose their own councillor who they feel comfortable with.

Carer's assessments (Conversations) should be easy to access and result in service provision when need is identified. Staff carrying out carers assessments should be trained and competent.

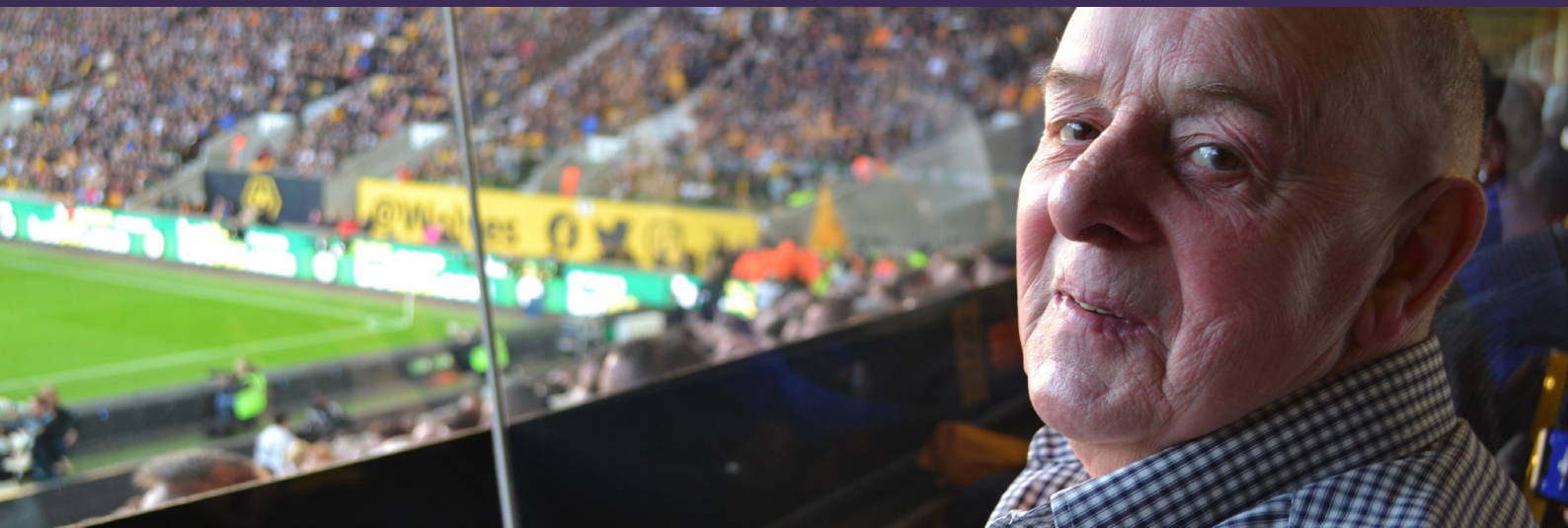
Carers would like **high quality planned and emergency respite** that they can trust will meet the needs of the person they care for. Services should be provided by well trained, competent staff who can meet each person's unique and sometimes complex needs. When planning respite, the needs of the whole family need to be considered together. There are many different reasons for requiring respite. The range of respite services needs to be flexible enough to meet all of them.

Carers value **time away** from their caring role to live an ordinary life. This means different things for different carers, with examples including time alone, to have hobbies, to self-care, to do homework with their other children, to meet with friends, to attend organised group and activities for carers, to develop relationships, to have a family of their own, to go away to university and to pursue a career.

There needs to be an increased **awareness of the caring role** within schools, GPs, employers and the public, including the impact on emotional wellbeing. They should be able to recognise the early warning signs of problems with emotional wellbeing. Schools, employers and GPs should promote the caring role amongst students and employees. Carers wish for understanding, empathy, peer support and the same ambition for them as for others. Flexible practices are required such as working from home, alternative working patterns, appointments at times that fit with the caring role and home visits.

Carers use a wide range of **technology** to support them in their caring role. Seventy-nine percent of carers use social media, 55% use Facebook, 22% use Instagram, 10% use Snapchat, and 8% use Twitter. Using a combination of face-to-face and virtual approaches enables people choice and maximises access to services and engagement. In line with this, the Carer Support Bulletin, which is highly valued by carers, is distributed in both paper form and electronically. Some carers and staff require training in the use of technology.





Information about services is very important. It needs to be up-to-date, available in one place, easily accessible to all, easy to understand and provided at the right time. Some people find it difficult to navigate information about the Local Offer and felt it is not enough to signpost to information. A discussion about the information and the opportunity to ask questions and seek advice is required.

The **transition** for young carers to adulthood needs to be improved. Areas for improvement include better identification of young carers, strengthening of the assessment process, offering the right support at the right time, making accessible information available prior to transition and not losing contact with carers during transition.

Young carers would like more opportunities to make friends, share their experiences with other young carers, have a break from their caring role and have a voice. They would also like schools, colleges and their friends and family to have a greater understanding of the impact of being a carer.

Carers would like better **financial support** to help with the increased costs they experience. Their caring role may limit their educational, work and training opportunities and therefore their income. Working carers may give up work or reduce the hours they work to carry out their caring role.

Equality and diversity should be an explicit and integrated part of the plan.

Services provided by different organisations need to be **better co-ordinated**, including health and social care services, Special Educational Needs and Disabilities (SEND) provision and services for young carers. Where the carer and the cared for person have different GPs, the GPs should work together.

Services need to be **responsive**. In a timely way, telephones should be answered, and answer machine messages should be responded to. When a call back has been arranged, it should be made on time. If information is promised, it should be provided on time. Named contacts and choice of key worker should be given whenever possible. Carers value the role of telephone calls in preventing isolation.

Many participants expressed an interest in being part of the **delivery** of Our Commitment to All Age Carers. Some would like to be part of the group that oversees the delivery of the plan, some in smaller groups that work on specific actions and some in the commissioning and review of services. Some carers would like to co-design services including writing service specifications.

Priorities and themes

In response to legislative requirements, local knowledge and consultation, the Council's five priorities for carers are:

- Employment and financial wellbeing.
- Services and systems that work for carers.
- Support for young carers.
- Recognising and supporting carers in the wider community.
- Building research and evidence to improve outcomes for carers.

The following values will underpin all the work undertaken to achieve the priorities:

- **Co-production** – working with carers, their families and other partners, using each partner's knowledge and experience to help plan, design and develop services for carers.
- **Continuous improvement** – increasing the quality of services for carers through review and change.
- **Connecting with communities** – promoting resilient, inclusive communities, helping to reduce isolation, and building connections that enable carers to support each other.
- **Fair and equal** – addressing the inequalities experienced by carers.
- **Safeguarding** – ensuring that carers and the person they care for are safe



Employment and financial wellbeing

To achieve this, we will:

- Align support for carers with the Wolverhampton Pound approach, building and retaining local wealth in Wolverhampton to improve outcomes for local people including carers.
- Ensure carers have access to information about benefits, grants and financial management and financial support and advice.
- Identify and raise awareness of pathways into adult education and training for carers.
- Review the Council's Support for Carers policy and build understanding of the number of carers employed and how their caring and employment responsibilities can be balanced.
- Increase employer's awareness of carers legislation, how to identify carer employees and actions that can be taken to enable carers to balance their caring and employment responsibilities.
- Encourage employers to increase employee awareness of the carer role and promote peer support.
- Work with the Wolves Anchor Network to explore how they can support carers in the City.
- Engage with Wolves at Work to explore how carers can achieve their employment goals.
- Engage with Wolverhampton Cares to explore opportunities for carers who may wish to pursue a career in the care sector.



Services and systems that work for carers

To achieve this, we will:

- Promote a City-wide understanding of carers rights to and benefits of an assessment, known in Wolverhampton as a Carer Conversation, and always offer assessments.
- Enable access to clear, concise, accurate and relevant information and communicate changes to it.
- Promote the need for services, including universal and preventative services, to make reasonable adjustments to enable carers to access services that meet their equality needs and at times that fit with their caring role.
- Improve the assessment pathways for parent carers whose child is preparing for adulthood.
- Continue to develop a mixed approach to providing face-to-face and virtual services.
- Ensure the voice of carers is reflected in delivery of the Digital Wolverhampton Strategy to maximise digital inclusion.
- Use social networks to empower and enable collaboration within communities.
- Work with carers to review the role of a carers café/carers forum.
- Review carers need for advocacy and map the services available.
- Review the current short breaks and respite (planned and crisis) offer for carers, with a focus on the range of individual needs, a whole family approach and quality.
- Ensure that in emergency situations carers in need of support are supported as quickly as possible.
- Help carers to plan for an emergency, using their own resources wherever possible.
- Use personalisation to give carers choice and control.
- Map emotional wellbeing services and use this to identify and address gaps.
- Promote the device loan service to enable carers to try assistive technology that may help them.
- Enable carers to access training to maximise their digital skills and knowledge.



Supporting young carers

To achieve this, we will:

- Improve the identification of hidden young carers in schools and by services which work with children, young people and their families.
- Increase schools' awareness and understanding of the impact of being a young carer on education and emotional wellbeing.
- Increase schools' awareness of the services available to young carers so they can inform young carers about them.
- Ensure young carers know their rights regarding assessment and are always offered a young carers assessment.
- Enable young carers to obtain information safely and easily and provide information which is tailored to their needs and level of understanding.
- Ensure the voice of young carers is included in delivery of the SEND strategy.
- Ensure the voice of young carers can influence information about the Local Offer.
- Support young carers to use the Youth Council to have a voice.
- Review the commissioned support service with a focus on the transition from young carer to adult carer and how emotional wellbeing is supported.
- Review the opportunities available to young carers to talk to other young carers including young carers clubs.
- Prepare young carers for transition to adulthood.
- Support young carers to access educational and out of school opportunities that help them develop and maintain friendships with their peers.
- Help young carers to have the same opportunities to access education, work experience and training as any other young person.



Using research and evidence to improve outcomes for carers

To achieve this, we will:

- Review the impact of the Coronavirus pandemic, both positive and negative, including on emotional wellbeing and use the findings to influence changes to services and systems.
- Maintain up to date knowledge of the technology that is available to support carers and promote the use of it.
- Maintain up to date knowledge about the research undertaken by other local and national organisations and use this to influence changes to services and systems.
- Set up an implementation group with carer representatives and partner agencies to enable co-design and co-production.
- Collect information on and analyse the carer profile, including equality information, and use this to plan services accordingly.
- Develop engagement opportunities including for GPs, schools and communities.

Recognising and supporting carers in the wider community

To achieve this, we will:

- Work with partners to identify hidden carers who are not engaged with services and provide information on the support available and how to access it.
- Maximise opportunities such as Carers Week and Carers Rights Day to increase understanding of the caring role and help people to identify as a carer.
- Encourage carers to inform their GP about their caring role so that appropriate support for both physical and emotional wellbeing can be offered.
- Address the stigma some carers feel their caring role has.
- Work with voluntary and community organisations to reduce social isolation, increase the use of carer peer support and support emotional wellbeing.
- Offer carers safeguarding advice and support when appropriate.
- Promote and increase take-up of the emergency card.
- Ensure the carer voice can influence the delivery of the City Housing Strategy and access to the Disabled Facilities Grant.
- Ensure the carer voice influences the Council's All Age Travel Assistance Policy.
- Consider the opportunities available for carers to access leisure and social offers in the City.
- Explore the introduction of the carer passport scheme.

Monitoring performance and accountability

Partnership working is a key theme running through this strategy. During its development, many participants expressed an interest in being involved in the implementation of the plan. Through the involvement of partners including carers, health and care services, the voluntary and community sector, education and others, a whole system approach to improving outcomes for carers will be taken. An implementation plan to support Our commitment to All Age Carers plan will be co-produced, identifying the actions required for each priority and for each action the measurable target, responsibility and timescale.

An implementation partnership will oversee delivery of the implementation plan, enabling an ongoing conversation with opportunities for continuous influence. The partnership will be supported by smaller groups responsible for specific actions within the implementation plan. The partnership will also monitor and report the impact of the actions.

Our Commitment to All Age Carers is best aligned with the governance and scrutiny provided by Health and Wellbeing Together Board and therefore the implementation partnership will report to this Board.

Robust contract and performance management arrangements will be included in the commissioning arrangements for services for carers, to include outcomes monitoring and regular consultation with carers to shape the delivery and development of services.



Further information

Legislation and national strategies

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City of Wolverhampton Council, Civic Centre, St. Peter's Square,
Wolverhampton WV1 1SH

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