

Placement Sufficiency Strategy

2025 – 2028



Walsall Council

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Foreword

At the heart of everything we do in Children's Services is our Walsall Right 4 Children Aspiration that every child and family in Walsall is understood, feels happy and safe, with a strong sense of belonging enabling them to learn, achieve and succeed.

Through our Families First for Children model of practice we work tirelessly to support families and to meet their needs at the earliest opportunity. We do all that we can to support families to stay together. I am proud that as a result of this work we are seeing less children come into our care and more children returning home to their families.

However, for some children and young people it is not possible for them to remain in the care of their parents or extended family and is our responsibility as corporate parents to find local homes where they are safe, happy, nurtured and which meets their needs and offers access to the support and opportunities needed for them to achieve success and to thrive in life.

We have high aspirations for children and young people who are in our care and are committed to achieving permanency and stability for them at the earliest opportunity, through tailored support provided through our services and those of our partners.

As our care experienced children and young people grow into adulthood, we will ensure that they are equipped to lead independent lives and provide them with the highest possible level of support to recognise and meet their needs.

To enable us to achieve our vision, we need to work with our partners to ensure we have sufficient local, high-quality homes available to meet the needs of our children. This strategy enables us to understand the needs of our children and young people and what range of homes we need available to meet these needs.

I am confident that this strategy will take us forward and support us in making our vision a reality.



A handwritten signature in black ink that reads "Colleen Male".

Colleen Male

Executive Director – Children's Services

Introduction

This strategy is critical as it is all about having enough homes for children who are in our care, that they have the right type of home to live in, that these homes are high-quality not only meeting their needs but supporting them to achieve the best they can – it is set in the context of our partnership vision, ‘that every child and family in Walsall is understood, feels happy and safe, with a strong sense of belonging enabling them to learn, achieve and succeed.’

To achieve this vision we have defined five strategic priorities.

Our Strategic Priorities

We want to:

1. Broaden the range of local provision

Ensure we have the right types of homes to meet the diverse and changing needs of children in our care.

2. Raise the quality of care:

Work with providers to deliver consistently high standards across all settings.

3. Promote stability and permanence:

Reduce placement moves and support long-term, loving relationships for every child.

4. Keep children close to home:

Increase the number of children living in or near Walsall, connected to their communities.

5. Strengthen our workforce and partnerships:

Build a skilled, supported workforce and a collaborative system that puts children's needs first.

We aim to keep children close to home and provide the best possible care. Wherever safe and appropriate, we will support families to stay together. When care is needed, we prioritise family based options, including kinship care and actively engage extended family networks to maintain loving relationships.

We are committed to offering the right home – one that meets the child's need and keeps them connected to their community. As young people transition to adulthood, we ensure access to high-quality accommodation and tailored support to help them thrive.

Context

a. National Strategy: Stable Homes Built on Love

Following an **Independent Review of Children's Social Care**, the government published a new strategy '**Stable Homes Built on Love**', which brings forward a range of plans to reform how children's social care is delivered and has changed the national context for social care placement sufficiency.

These reforms are being tested through a number of different pathfinders, the most relevant of which to this strategy are the 'Families First' and 'Regional Care Cooperative' pathfinders. We do not have a regional care cooperative in the West Midlands but we work closely with the West Midlands Commissioning Hub to ensure that we maximise the efforts of all 14 local authorities and their respective trusts.

b. Our Legal Duties

There are a range of legal duties associated with an overall 'Sufficiency Duty' on local authorities as part of the **Children Act, 1989**, to secure accommodation for children in their care within the local authority area:

- Section 17(1) sets out the general duty of a local authority to provide a range and level of services to children in need and their families in a local area that are appropriate to their needs.
- Section 20 requires local authorities to provide accommodation for children in need within the area if they appear to require accommodation.
- Section 21 requires a local authority to accommodate certain children who are remanded or who are subject to a criminal court order.
- when deciding on the most appropriate placement, Section 22 requires a local authority to give preference to a placement with a relative, friend or other person connected with the child and who is also a local authority foster parent.
- Section 22C sets out additional factors which must be taken into consideration when deciding the most appropriate placement:
 - allowing child to live near their home
 - not disrupting child's education/training
 - enabling the child and other sibling to live together
 - meeting the needs of disabled children
 - providing accommodation in the local authority area unless that is not reasonably practicable
- the **Children and Social Work Act 2017**, extends the duties on all local authorities to have regard to **seven corporate parenting principles** when exercising their functions in relation to children in care and care leavers up to the age of 25.

Local

This strategy closely aligns to with the ambitions of:

- Walsall Right for Children Vision and Priorities (WR4C)
- Our Children in Our Care Strategy 2025 - 2028
- Our Care Leavers Strategy 2025 - 2028
- Our Permanence Strategy 2025 - 2028
- Walsall Children and Young People's Strategic Alliance: Children and Young People's Strategy 2024
- Walsall SEND and Alternative Provision Strategy 2023 – 2028



Together, these strategies will collectively seek to improve outcomes for our children and young people in our care and our care leavers. To complement the above strategies, participation and engagement strategies are also in development.

This strategy supports the ambitions of the **Pursing Excellence: Council Plan** which in turn reflect the ambitions of **We Are Walsall 2040** borough partnership plan.

Walsall Right 4 Children – Our Aspiration

"Every child and family in Walsall is understood, feels happy and safe, with a strong sense of belonging enabling them to learn, achieve and succeed"



Our WR4C aspiration will be delivered through a relentless focus on our **five foundations** underpinning everything we do and and **four priorities** driving our work.

Our Priorities

Empowering
Futures from
Early Years

Cultivating
Belonging

Workforce

Big
Conversation/
Big Collaboration
with Children

Our Foundations

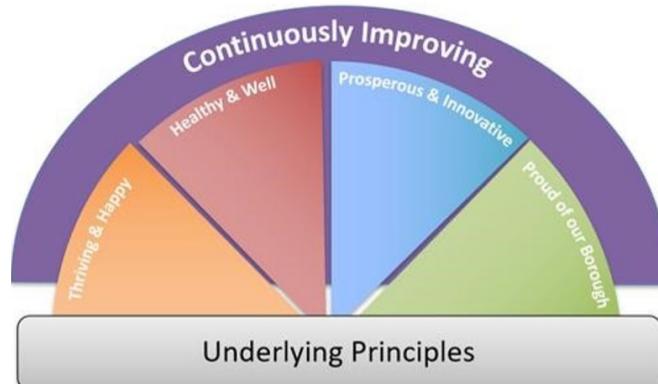
We will focus on understanding children's lived experiences and how we can improve them.

We will work with children, young people and families and their local communities enabling them to make positive and sustainable connections.

We will focus on or actively addressing gaps in equality and racism.

We will learn and improve together – we will drive a culture of continuous improvement by diligently closing the learning loop.

We will continue to be proud of what we do and celebrate our achievements.



Our Children

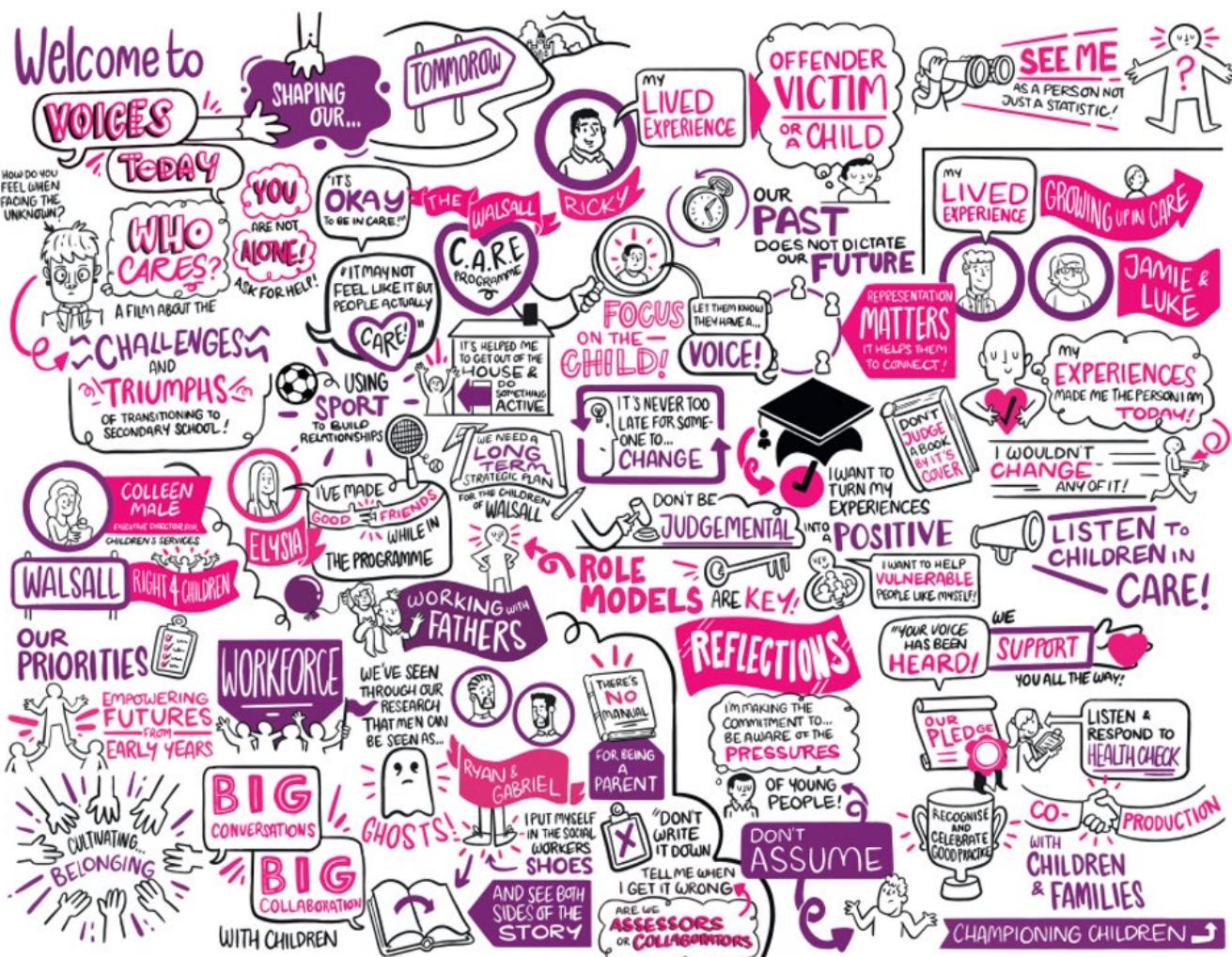
There is a range of data that we use to understand our children – their feedback, understanding the views of a range of professionals working with them, the data which we look at nationally, regionally and locally, broadly speaking these are the key things we know about our children in care.

- We have seen a decline in the number of children coming into care overall.
- Overall there are more boys than girls.
- The average age of children coming into care is increasing.
- The ethnicity of children is becoming more varied.
- More children have an Education Health and Care Plan and
- We are seeing more moves for our children once they come into care.

Most children have come into care as a last resort. Their experiences of abuse and/or neglect make it unsafe for them to remain at home with their families. This has a huge impact on children and is likely to see them experience a range of difficult emotions losing the place they called home. It is critical that people working with our children understand this and have the skills to support them, making them belong within the new home setting providing a safe space for them.

Our children have told us that their social worker is critical and working with the same social worker really helps them to build a good relationship where they feel their needs are better met. They told us that there were benefits to independent people outside of their social workers advocating and championing their needs but not all children knew how or who to get this support from. Most children said that they had faced disruption and/or moves in their homes which they found hard. Their experiences with most homes they had were generally OK, but they felt that sometime people didn't understand them and also felt that more time could be invested in helping them to think about the relationships children develop as these friendships made a massive difference to how they felt. Some children felt that more time could be spent on thinking about their future, helping them to develop high hopes for what they could achieve in life.

Through this strategy we want to ensure that the partnership approach and our work centres on hearing their experiences and ensuring that these are addressed through our delivery plan. We have incorporated key actions in the plan centred on addressing the challenges children told us they felt they had.



Spotlight on Children's Homes in Walsall

By the end of June 2025, 16.4% of Children in Care (CiC) were placed in secure homes and children's homes in Walsall, which is higher than the Statistical Neighbour (SN) level (9.6%), the West Midlands (WM) average (11.4%), and the national level (11.4%) in 2024.

Internally

We have increased the number of internal children's homes and we will continue to do this. These internal homes have high occupancy rates (circa 97%) they are rated good and are more affordable than external provision.

Our children's homes are a safe place to live for children and young people for whom it is identified as the most appropriate placement. They will feel cared for and benefit from the support offered by staff and services to help them to succeed and thrive.

Walsall maintains six internal children's homes, including specialist overnight shortbreak support for disabled young people. We have opened three residential children's homes since 2023 through capital investment of over £1,721m over the last 2 years increasing internal capacity to 13 beds.

- Our Homes are embedding a trauma informed PACE approach to caring for our children. All staff have undertaken 4-day PACE training. Further trauma informed training has been undertaken with Professor Shemmings.
- Our children's homes are supported by monthly clinical supervision from CAMHS.
- We have embedded robust quality assurance and monitoring of our internal residential children's homes to achieve good or outstanding outcomes for our children as well as meeting Ofsted requirements.
- Our support and training is improving staff retention, and we are beginning to see good progression planning to develop future managers for our children's homes.

Externally

We have circa 71 registered beds in external residential provision within Walsall. This means if these beds were able to meet the needs of our children we would have sufficient provision. By the end of June 2025, 79 (14% of CiC) are placed in external children's homes. However unfortunately many of our children are not accessing local homes (72 out of 79 CiC who are placing in external children's homes). We want to work with local providers to understand the barriers and work with them to ensure we maximise the use of local provision.

A new West Midlands Residential Framework is implemented in 2025. The Council is committed to using this framework where it provides the best quality and affordability. We want to stop using spot purchase arrangements and ensure all provision is secured using a regulated route.

Spotlight on Foster Care in Walsall

By the end of June 2025, 71.4% of Children in Care (CiC) were placed in foster care in Walsall, which is higher than the national level (68.3%) , and lower than the West Midlands (WM) average (72.3%) in 2024. Over the last 5 years, ‘first placement’ being in-house fostering has dropped from 71% to 53%. This has created a financial increase for IFA purchases.

Internally

We have seen a reduction in the number of children matched with internal foster carers. By the end of June 2025, only 92 of 566 (16.3%) CiC are living with internal foster carers, significantly lower than the national level (27.9%) and the WM average (24.8%). There are two key drivers at play here there is an aging carer population within Walsall and there has been a successful trend in achieving permanence for children with these carers as they choose to adopt, whilst this is an excellent outcome for our children it has meant the overall reduction has been sharper.

A key priority is to increase the number of internal foster carers. This type of care often results in better outcomes for children and is more affordable. We will seek to do this building on the successes which include,

- Having a well-established and experienced service.
- Foster Carers feel part of a strong fostering community.
- Mockingbird Family Model, with six fully operational Mockingbird constellations in Walsall.
- Implemented the New Horizon’s Fostering Scheme.
- Walsall Council are a Fostering Friendly Employer (Fostering Network).
- Where accommodation is a barrier to foster carers meeting the needs of children in their care, they have implemented a Capital Grant Scheme to fund adaptations to foster carers’ homes so that they can care or continue to care for children.

Externally

Most of our children (219 of 566 – 38.7%) who are living with a foster carer are placed with an independent foster carer, significantly higher than the average national level (24.8%), and the WM average (30.6%). We remain committed to securing foster care where this best meets the needs of our children and independent foster carers are critical to achieving this.

External fostering provision, delivered by Independent Fostering Agencies (IFAs), continues to play a significant role in meeting the needs of Walsall’s looked after children. While the council prioritises the recruitment and retention of in-house foster carers, external placements are often required to meet specific needs, provide specialist support, or respond to urgent placement demands.

Walsall Council works with a range of IFAs, many of which are part of regional frameworks that support quality assurance and cost control. These agencies offer placements for children with complex needs, sibling groups, and those requiring therapeutic fostering. The council maintains oversight of external fostering arrangements through placement panels, contract monitoring, and regular engagement with providers.

The fostering market nationally is dominated by a small number of large private equity-owned agencies, including Polaris, Compass, and National Fostering Group. These providers account for a significant share of the independent fostering sector. Locally, Walsall continues to monitor market trends and provider performance to ensure placements are safe, stable, and meet the needs of children.

Spotlight on Kinship Care

Kinship care is really important to us, children being cared for by relatives or close family friends is a vital part of how Walsall want to work. It offers stability and continuity for children who cannot live with their birth parents, often avoiding the need for formal care arrangements. Walsall Council recognises the significant role kinship carers play and is committed to supporting them through a range of services and initiatives.

National figures suggest that around 16% of children in care are placed with kinship carers. Here in Walsall we have 92 of 566 children which equates to 16.3% of children in kinship care as of 30 Jun 2025, higher than the national level (15.6%), and slightly lower than the WM average (16.9%).

Walsall Council supports kinship carers—also known as connected foster carers—through financial assistance, access to an out-of-hours support line, and opportunities to build peer networks. The Kinship Connected service delivered in partnership with the charity Kinship, provides regular support groups, training, and advice for carers regardless of legal order.



Spotlight on Supported Accommodation in Walsall

Supported accommodation refers to housing arrangements for young people aged 16 and 17 who are looked after by the local authority or are care leavers, and who need some level of support to live independently. This provision has been used for some time but has recently seen a shift to becoming regulated by Ofsted this has impacted on the market and we remain committed to supporting providers to manage this transition well.

Supported accommodation (SA) plays a vital role in Walsall's placement sufficiency strategy, offering a semi-independent living option for young people aged 16 and 17 who are preparing to transition out of care and into adulthood. It is used both as a planned step-down from residential care for those ready to develop independent living skills, and as a contingency option for young people in foster care approaching 16, where Staying Put arrangements may not be viable. Current data indicates that Walsall places an average of four young people per month into supported accommodation, including 2–3 separated migrant young people (SMYP) via the National Transfer Scheme (NTS).

As of June 2025, Walsall is actively working with 18 registered providers, three of which are locally based. These providers are currently accommodating 35 young people aged 16–17 (6.2% of CIC), lower than the national level (9.8%) and the WM average (7.4%), with just over half placed within Walsall properties. An additional 34 SMYP aged 18+ are also supported through these arrangements.

We have worked hard to support providers across the region to ensure that they are able to successfully secure registration with Ofsted. This has included developing strong provider relationships, responsive action to concerns, effective regional collaboration and a regional approach to quality assurance, there remains a need to develop more high-quality, local provision as most providers are still not securing the quality care we want for our children following their ofsted inspections and a high number of children are placed with a small number of providers.



Our Strategic Priorities

1. Broaden the range of local provision

Making a Difference:
To increase the range of provision we will:

- Increase the number and range of internal foster carers.
- Increase the number of prospective adopters available regionally through targeted recruitment, focusing on recruiting adopters who are able to adopt older children and children in sibling groups.
- Increase the number of kinship care arrangements in place.
- Ensure that local residential provision is able to meet the needs of children (specifically those with complex needs where DoLS restrictions are in place.)
- Undertake market engagement with external providers to encourage the setting up of new provision locally.
- 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.

2. Raise the quality of care: Work with providers to deliver consistently high standards across all settings.

Making a Difference:
To improve the quality of care we will:

- Develop a shared quality assurance framework for local care provision aligned to the regional process to ensure consistency.
- 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.
- 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.

3. Promote stability and permanence: Reduce placement moves and support long-term, loving relationships for every child.

Making a Difference:
To support more children and young people to achieve permanence within loving and stable homes we will:

- Ensure that there is a focus on strengthening family networks from the first contact with Children's social Care.
- Ensure children who enter care have an effective permanence plan as soon as possible.
- Support our children to return to the care of their families through reunification and subsequent revocation of care orders is proactively progressed where this is appropriate.
- Provide training and support for special guardians to equip them to meet the needs of the child or young person and maintain stability.

4. Keep children close to home: Increase the number of children living in or near Walsall, connected to their communities.

Making a Difference:
To keep children close to home we will:

- Increase the number and range of internal foster carers.
- Increase the number of prospective adopters available regionally through targeted recruitment, focusing on recruiting adopters who are able to adopt older children and children in sibling groups.
- Increase the number of kinship care arrangements in place.
- Ensure that local residential provision is able to meet the needs of children (specifically those with complex needs where DoLS restrictions are in place.)
- Undertake market engagement with external providers to encourage the setting up of new provision locally.
- 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.

5. Strengthen our workforce and partnerships: Build a skilled, supported workforce and a collaborative system that puts children's needs first.

Making a difference:
To strengthen our practice and partnerships we will work with the Children in Care Alliance to:

- 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.
- Ensure we work closely with Walsall providers to wrap the local support via our local partners around the children in our care.
- Work together with the CAHMS collaborative to support children with complex needs access a pathway to more specialist mental health support.
- Understand the workforce and partnership pressures to coproduce a plan for how we will work collaboratively together.
- Work regionally to ensure that we are working as an active partner in our regional commissioning arrangements.

1. How will we know we have made a difference?

Our Plan

We have developed a detailed delivery plan to ensure that the aspirations of this strategy are realised which will be overseen regularly by our Placement Sufficiency Board internally and work with our Children in Care Alliance to ensure partners work effectively together to help us realise our ambitions. This provides details of the priorities, the actions, the timescales, the lead person to drive forward positive action and measures that enable us to know if this plan is having an impact.

We know that this plan will need to be kept current as circumstances evolve and we work closely with our children, our workforce, our partners and our providers to hear how things are changing. We will update the plan as we want this to be a living document that evolves and develops as our work does and helps us to measure the implementation of this strategy.

Our Performance

We will develop a performance dashboard that helps us see at a glance how well we are doing. The framework will align with the strategic priorities set and provide measurable information that will help us track out progress towards these goals.

Our Governance

The governance for this strategy will be layered as we need to drive forwards the internal improvement we require, work as a regional partner, work with local partners and ensure that children's views are central. There are five core parts to our governance:

1. We will continue to work with Children through a range of mechanisms such as the **Children in Care** Council to ensure have to hear their views and experiences so that we continue to keep our plan up to date with their experiences.
2. The **Placement Sufficiency Board** which includes all key officers from children's services and is chaired by the Director of Social Work, will drive and monitor the intentions, actions and priorities, sufficiency or lack of sufficiency impacts on all services that support children and young people. This will be the route to measure the progress made by the local authority.
3. However it is important that partners, providers, carers, children and young people are all invested in the aims of the strategy and committed to implementing the actions needed to achieve its stated outcomes. Partnership and collaboration will be key to achieving our sufficiency aims and market engagement events will be used to ensure the strategy is kept relevant and part of ongoing service development. Therefore the **Children in Care Alliance** will be critical to ensure that the partnership ambitions are realised.
4. We will work as a regional partner through the **West Midlands Commissioning Network** which is Chaired by the Director for Early Help, Partnerships and Commissioning. This forum will lead on the shared areas of work with the 14 local authorities in the West Midlands.
5. Regular reports on the delivery plan, performance and therefore the impact of the strategy will be taken into **Corporate Parenting Board**. Who are ultimately the partnership who hold us accountable for the delivery against this strategy and plan.

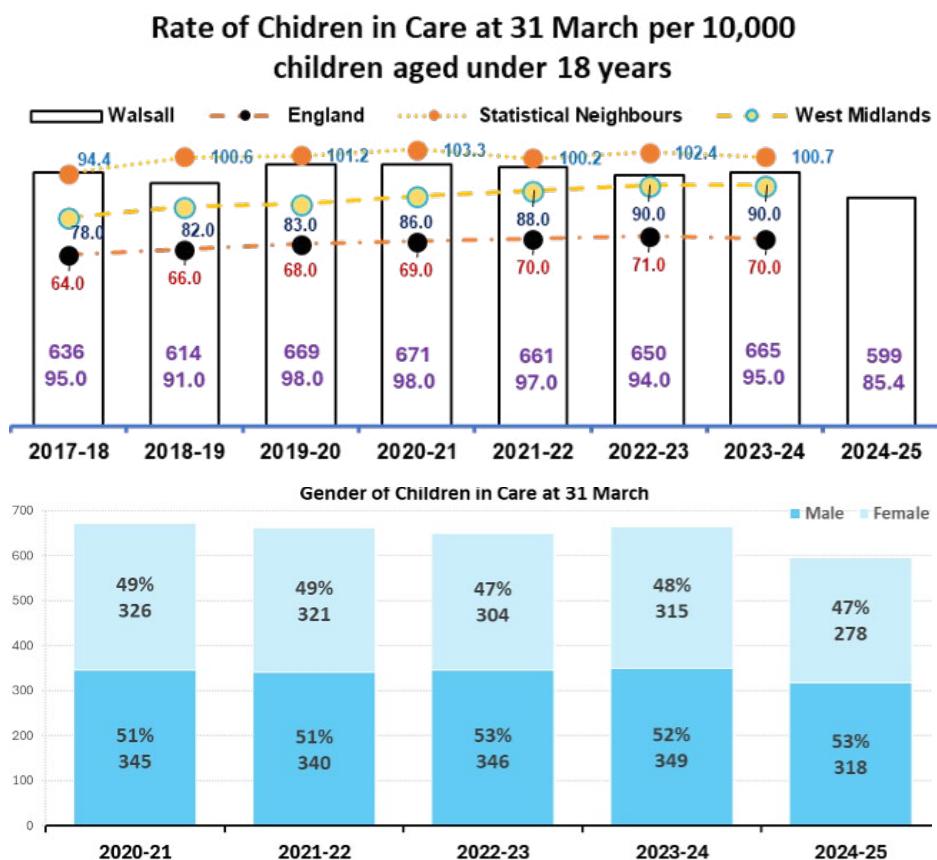
2. Overall numbers

As at 31/03/2025 there were 578 children in care compared with 665 on 31/03/2024, a decrease of 13.2%. There have been some significant demographic changes, particularly in relation to the ages of the children and the legal status of children entering and in care.

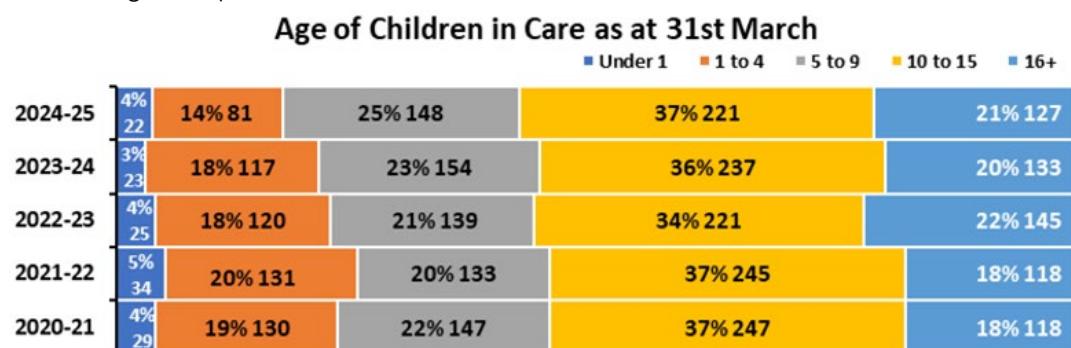
The rate of children in care was 82.4 per 10,000 children in the population aged 0-17. This is lower than statistical neighbours and west midlands but remains higher than national comparators. This has substantially reduced on 31st March 2025 compared to 31st March 2024.

However, the number of children in care remains higher than national comparators, despite falling numbers of children entering care. This is largely due to historical factors of children who entered care and are now likely to remain in care until they are 18. However, because of Walsall's lower rate of children entering care and because the rate of children leaving care is in line with comparators, the rate of children in care in Walsall is falling, while nationally and regionally it is in increasing.

The profile of children in care is also changing with the proportion of children who are male and the proportion of older children increasing. This is driven by increasing number of young people entering care on remand or as Unaccompanied Asylum Seekers and fewer younger children entering or remaining in care due to the success of the Family Safeguarding Model.



The proportion of younger children in care has reduced from 47% to 41% whereas the proportion of children aged 10 plus has increased from 53% to 59%.



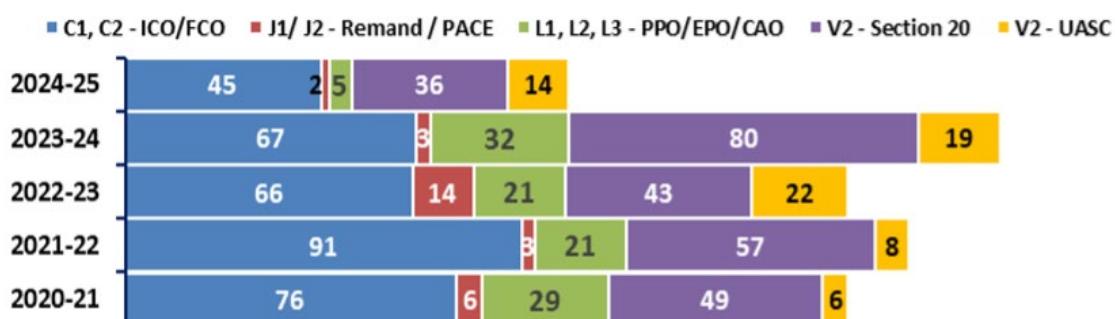
3. Children entering care

The number of children who are entering care is falling. For 2024-25 the rate of children entering care has reduced to 17.3 per 10,000, just 121 children. In 2023-24, 201 children entered care, a rate of 28.0 per 10,000 population aged 0-17. This is a decrease of 33.8% on 2023-24.

Based on the 2023-24 comparator data, the 2024-25 rate would have ranked Walsall in the lowest quartile nationally for children entering care (16 out of 152). The actual rate of 28.0 per 10,000 places Walsall in the second quartile (80 out of 152), whereas in 2022-23 Walsall was second quartile (49 out of 150).

Legal Status: However, while the overall number of children entering care is falling, the profile of those children and the reasons they enter care is changing significantly. The number of Separated Migrant Children (SMC) seeking asylum entering care has remained at 15.

Children Entering Care by Legal Status



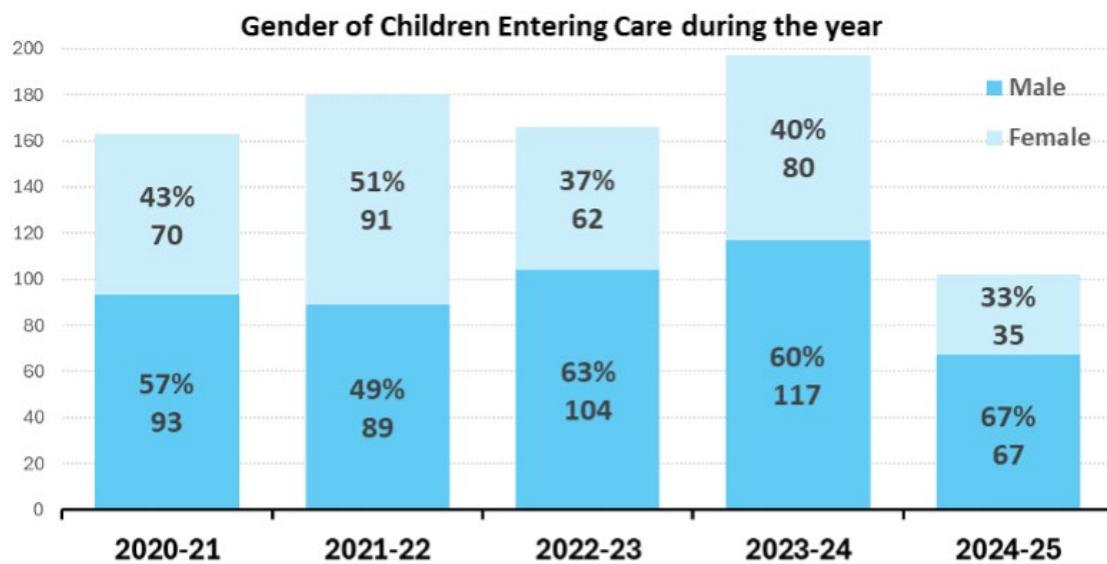
Children Entering Care by Legal Status



As a percentage, historically, SMC and young people on remand have accounted for around 6.5% of children entering care, in 2024/25 this cohort accounted for 12.4% of children who had entered care.

This change in profile of the reasons that children are entering care is also having an impact on the demographic make-up of the children who are entering care.

Gender: There is a significant difference between the numbers of boys and girls entering care. The percentage of boys entering care has increased from 49% in 2021-22 to 63% in 2024-25. While the overall number of children entering care has decreased by 39.8% on the previous year, the number of boys entering care has decreased by 35.3%, whereas the number of girls entering care has decreased by 46.3%.



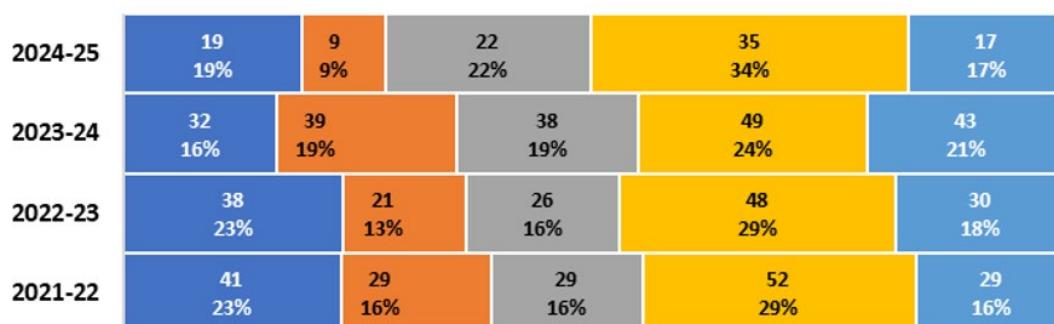
Age: Children who are entering care are getting older. This is driven by two main factors – the first is the increase in SMC and remand, as young people in this cohort tend to be older. The second factor is the impact of the Family Safeguarding and Families First for Children is successfully reducing the number of children who enter care following a period of time on a child protection plan,

Overall, the number of children aged 9 and under has decreased by 4% on the previous year, whereas the number of children aged 10 plus who have entered care has increased by 5%. Overall, the proportions of children entering care has changed from over 55% being aged 9 and under in 2021/22 to a 50/50 split (50% aged 9 and under and 50% aged 10 plus).

Within the 9 and under cohort, the biggest reduction has been in the 1 to 4 cohort which has reduced from 19% to 11% (the 1 to 4 cohort from 16% to 18% and the 5-9 cohort has increased from 19% to 22%) in the 10 and over cohort, entrances to care for children aged 10-15 has increased from 24% to 34% whereas for young people aged 16+ there has decreased from 21% to 16%.

Age of Children Entering Care by Age

■ Under 1 ■ 1 to 4 ■ 5 to 9 ■ 10 to 15 ■ 16+



Ethnic background: The proportion of children from ethnic backgrounds other than white is also increasing, largely within the Asian and Other groups. This is driven by the increasing number of UASC, but also the increasing proportions of older children entering care generally as children who enter care from these backgrounds, tend to be older.

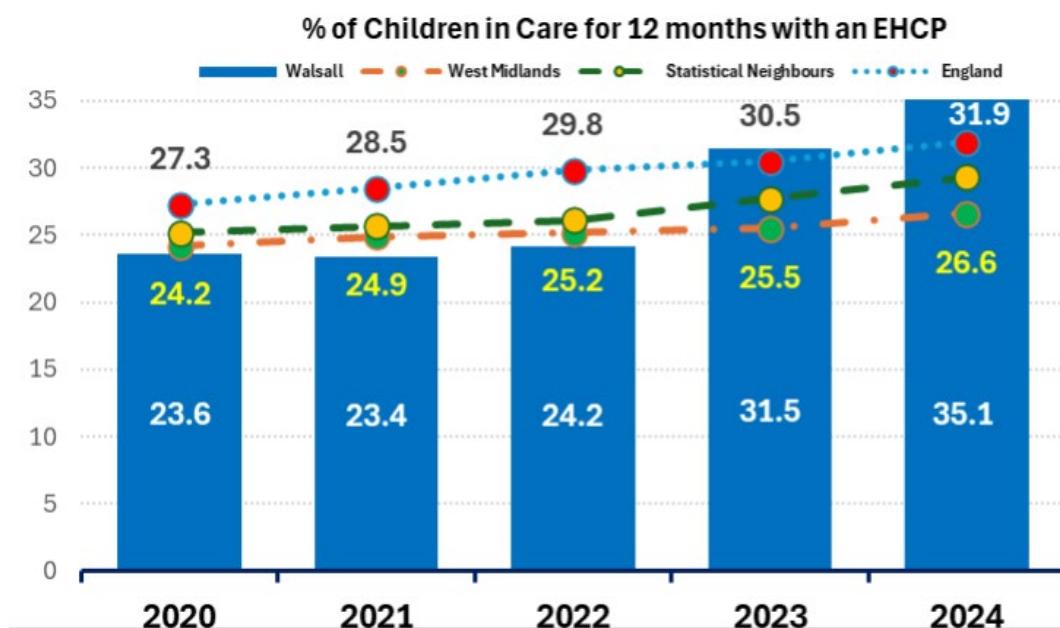
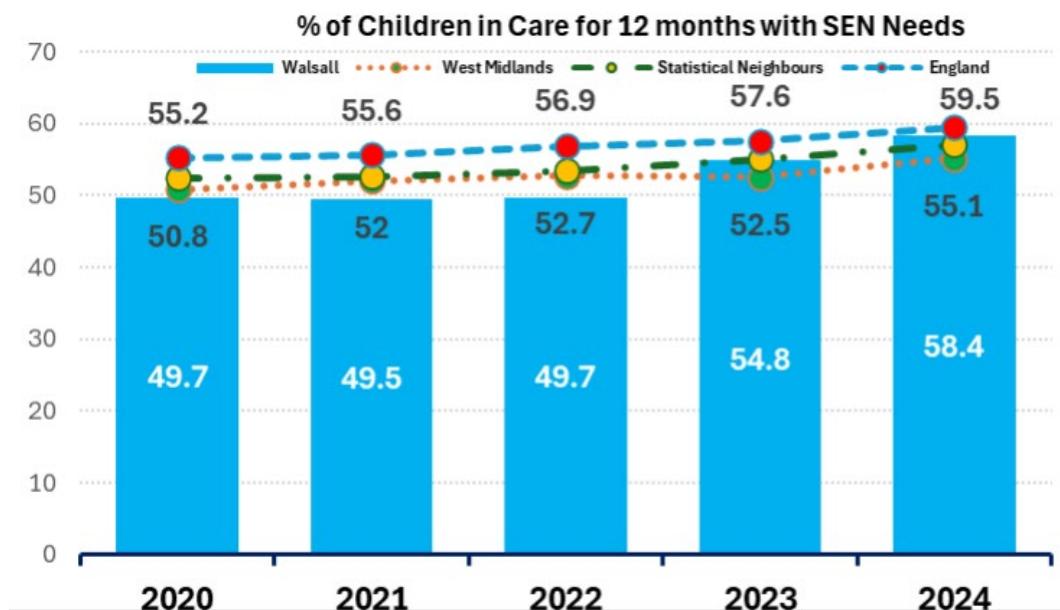
Ethnicity of Children Entering Care during the year

■ White ■ Black ■ Asian ■ Mixed ■ Other ■ Not Known



Need: The majority of children (66%) entered care in 2023-24 for abuse or neglect, followed by absent parenting at 14%. In 2024-25, the proportion entering care for abuse and neglect had reduced to 48%, while the proportion with family dysfunction had increased to 16%. Conversely, the proportion of children entering care with a need of absent parenting has increased from 14% to 24%.

Many of our separated migrant children seeking asylum are aged 16/17 years and consequently their ongoing support continues as care experienced young people. There are 46 care experienced young people aged 18 to 24 being supported by our Transition and Leaving Care Service. 10 of them are still awaiting a decision from Home Office in relation to their asylum claims, 15 have been awarded indefinite leave to remain or exceptional leave to remain granted, 5 have had their asylum application refused, 12 have refugee status granted, 3 humanitarian protection granted and 1 overstayer.



4. Separated Migrant Children Seeking Asylum (SMC)

At the end of December 2024 there were 22 young people in care who were classed as CMC, accommodated as either spontaneous arrival in Walsall or the National Transfer Scheme. Since April 2024, 14 young people seeking asylum have been accommodated by Walsall. All the young people accommodated have been males from a range of countries.

13 of the 22 children have been accommodated through the 60 mandatory National Transfer Scheme from Kent Local Authority. 58 Age assessments in respect of the 14 spontaneous arrivals have 56 led to 3 young people being assessed as being 18 or over.

5. Children with Special Educational Needs (SEN)

Generally, fewer children in care in Walsall have identified SEN needs. Just 55.6% (190) children who had been in care for at least 12 months at the end of March 2023, had an identified SEN, this is lower than comparators (England – 58.1%). Higher than the West Midlands – 53% and in line with Statistical Neighbours – 55.6%).

The percentage of children in care for at least 12 months with an EHCP was 32.2% indicating 57% of children in care with SEND have complex needs that cannot be met through SEN Support alone. The 55.6% of children with SEN and 32.2% of children with an EHCP in care compares with 18.0% of children with identified SEN needs and 5.3% of children with an EHCP overall.

SEND needs, particularly more complex needs, which have not been previously recognised and supported can result in behaviours and needs which make it difficult to find places for children that are able to meet those needs.

6. Placement Types

Over 95% of children in care are placed in either foster care, with parents or in residential children's homes, secure or semisupported accommodation. This is also the case amongst comparators. However, we are seeing a shift within these categories, with fewer children placed in foster care and increasing numbers in residential children's home.

While the number and proportion of children in residential children's homes, secure or semi-supported accommodation has been increasing gradually over time, the decrease in the proportion of foster carers has only been seen largely within the last 12 months.

As the 2023-24 comparator data is not available, it is not possible to say whether this is something that has been seen elsewhere or whether it is a Walsall specific issue, however, comparators have seen similar increases in the proportion of children in residential children's homes, secure or semi-supported accommodation and anecdotally other LAs are reporting similar issues with foster placement sufficiency, so it is expected that comparator data will reflect what has happened in Walsall.

A similar shift can be seen in first placements of children entering care. Up until 2019-20, around 72% of placement starts were into foster care and less than 10% were in care homes or semisupported accommodation. In 2024-25, there was a significant drop in the proportion of children entering foster care to 54% and an increase in the children placed in care homes/semi-supported accommodation to 20%.

Between 2020-21 and 2023-24 the proportion of children entering care in fostering has been between 58% and 65% However, the proportion of first placements that are with Kinship or Connected Carers has been around 10% to 17%. The decrease in Kinship Care and Connected Carers is largely in the 10-15 age category where the proportion of children for whom this was their first placement has fallen from an average of 16% between 2019 and 2021 to an average of less than 7% between 2021 and 2025. Children's placement type is changing in light of changing age ranges of children in care.

Placements of Children in Care at 31st March

- Foster Placements
- Placement with Parents
- Secure Units, children's homes and semi-independent living accommodation

2024-25	67.8%, 406	5.8%, 35	21.2%, 127
2023-24	67.7%, 450	7.5%, 50	20.2%, 134
2022-23	70.6%, 459	6.2%, 40	16.0%, 104
2021-22	75.8%, 501	6.7%, 44	12.9%, 85
2020-21	75.1%, 504	8.0%, 54	10.7%, 72

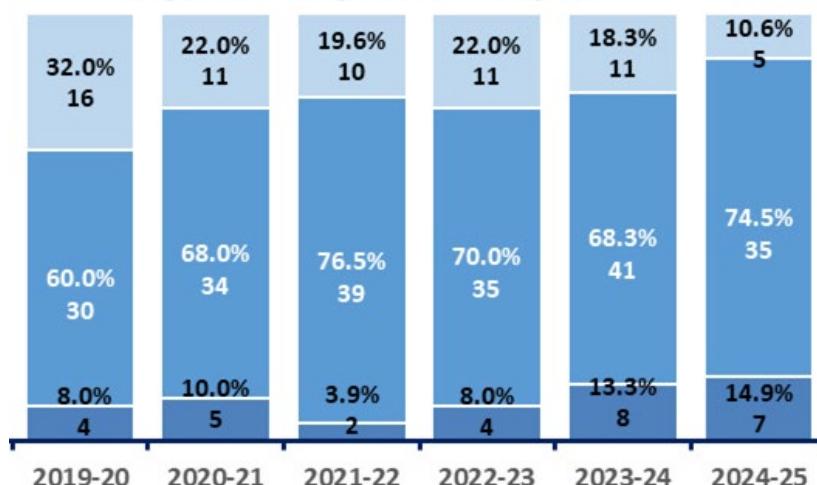
First Placements of Children Entering Care in the year

- Foster Care - Friends and Family
- Foster Care - Not F & F
- H5/K3 - Residential supported accommodation (not CHR)
- K2 - Any Children's Home (except secure)
- Other Residential
- P1 - Placed with Parents

2024-25	11.8% 12	41.2%, 42	11.8%, 12	8.8%, 9	8.8% 7	19.6%, 20
2023-24	14.9%, 30	47.3%, 95	14.4%, 29	4.5% 9	4.5% 28	5.0% 10
2022-23	11.0% 18	50.9%, 83	13.5%, 22	3.7% 6	3.7% 25	5.5% 9
2021-22	10.2% 18	55.4%, 98	10.2% 18	7.9% 14	7.9% 11	10.2% 18
2020-21	16.6%, 27	41.7%, 68	6.7% 11	5.5% 9	5.5%, 23	15.3%, 25

Proportion by Age of Children starting a Children's Home Placement

- Age 5 to 9
- Age 10 to 15
- Age 16+



Where are we now?

We have a reducing number of children coming into the care of the local authority. We have however retained a similar number of children in residential care which places in a different position to many other local authorities. We have enough residential beds to meet the needs of our children yet most of our children go outside of the borough.

Foster care remains the largest type of provision (**72% -- 407** out of **566** as of 30 Jun 2025.) However we know that there is not enough of the right type of carers to meet the needs of all of our children possibly leading to a higher number of children in residential care than we would like. Whilst independent fostering agencies have maintained their share of this particular segment of the market the local authority has not seen the same trend – with a drop of 15.6% in our carers. Some of this is positive as we have seen many more go onto adopt our children however we also know that the demographic of carers is aging and we are not seeing an increase at the rate we need for the children we need to find homes for.

To ensure we have the right types of homes to meet the diverse and changing needs of children in our care we need to broaden the range of local provision. To align with our ambition to keep children close to home and with their wider family networks we want to ensure that we work with families to identify connected people and support them to care for our children. This remains a growing priority for us.

Whilst we have more provision now, we still aren't able to strike the balance between the needs of our children and the provision locally. This has resulted in some children in the wrong type of provision and in a small number of cases with an unregulated home which we want to avoid. We want to work with the market to actively shape local provision to meet needs and wrapping the support we have as a partnership to encourage local belonging.

Whilst there are a number of things that make up the quality of care, people's experiences, the regulator Ofsted are a useful tool to assess the overall quality of the sector. By the end of June 2025, within Walsall 88.6% of settings are good or outstanding, with 35 our children living in supported accommodation yet to be inspected following the introduction of the new inspection framework.

As a general rule we know that the quality of care could be improved based on the feedback from children and the experiences that they have could be more thoughtful about their future, people who can advocate on their behalf and the relationships which they need to develop to create a peer network of support.

Placements in children's homes

Accommodation Type	Number of Placemats	Year				% Change since 2021-22
		2021-22	2022-23	2023-24	2024-25	
Children's Homes (K2)	53	59	77	90		
Residential supported accommodation (not CHR) (H5/K3)	35	43	49	28		
Children's Homes (K2)		11.3%	30.5%	16.9%	69.8%	
Residential Supported accommodation (not CHR) (H5/K3)		22.9%	14.0%	-42.9%	-20.0%	

The proportion of children who enter a residential children's home as a first placement is relatively small, from 2017-18 to 2024-25 the number of children ranged between seven and nine. With an exception in 2021-22 where this increased to 14 (7.8%)

However, despite this the number and proportion of children in residential children's homes continues to increase driven by two factors. When a child enters a residential care home placement, they are less likely to move to a different type of placement (e.g. step down to foster care) and they are also likely to be children who will remain in care on a more long term basis. In addition to first placements in residential children's homes, there have also been an increase in children moving from foster homes to residential homes as part of a planned or unplanned move.

Boys are more likely to move into a children's homes either as a first placement or as a placement move. Of the 42 children whose first placement was a children's home between 2023 and 2024, 25 (69.0%) were male. Of the 90 who were in a children's home on 31st March 2025, 47 (63.0%) were male.

When we look specifically at the ages of children who have started to live in a children's home over the years, we can see that there has been some increase in the numbers of children aged 10-15. However, overall the proportions are fairly consistent. However, when we look at the detail within the 10-15 age category, we can see that there has been a distinct shift towards younger children starting placements within children's homes with 85% of starts in 2024-25 being for children aged 15 or under (compared with 68% in 2019-20 and 78% in 2022-23).

Unregulated Children's Homes

Due to difficulties in finding registered homes for children with increasingly complex needs we have also seen an increase in children aged under 16 who are placed in unregistered placements for a time, while a registered home is sought. As of 31st March 2025, there were 8 children in unregistered Children's Homes and one of the 8 children was living in CQC registered provision.

Placement Stability and Distance

The lack of sufficiency within placements also means that it is not always possible to find the right placement for a child quickly. This can mean that children are placed where there is availability until the right placement can be found. This leads to an increase in placement moves which impacts on short term placement stability.

We are also seeing an increasing in children experiencing moves which is impacting on longer term placement stability.

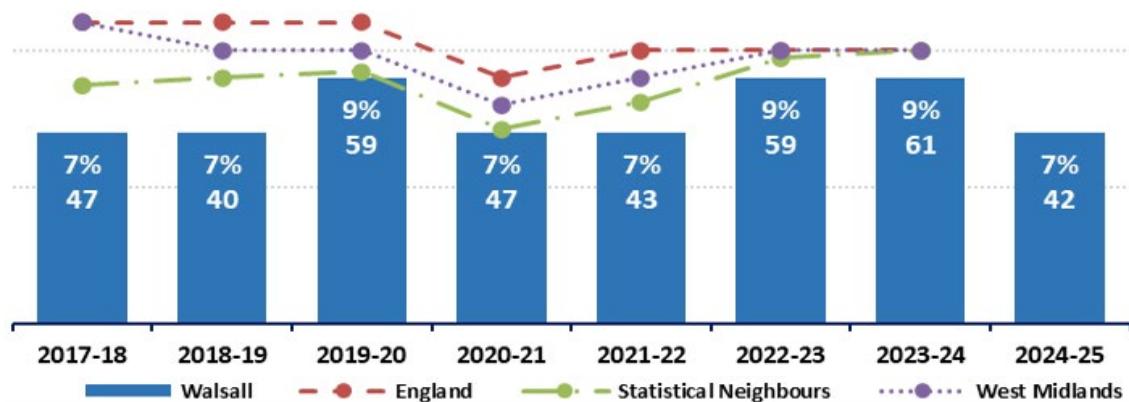
Historically Walsall's short-term stability has been generally better than comparators in 2024-25 the percentage has decreased to 8.7% from 9% in 2023-24 (all the other comparator averages being 10%). Conversely, long term stability has always been lower than comparators in Walsall. In 2023-24 at 66%, compared with 68% nationally and in the West Midlands. In 2024-25 this has increased slightly to 67%.

The proportion of children placed more than 20 miles from home and outside of the LA boundary has generally been lower than the comparator averages in 2023-24 at 18%, compared with 22% nationally, 17% Statistical Neighbours and 18% West Midlands.

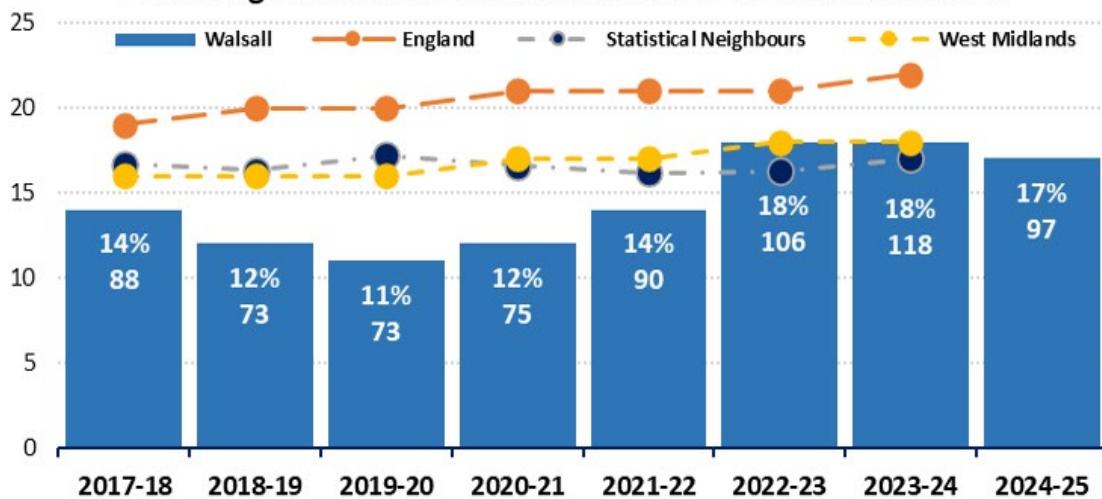
For the 44 children aged 10-15, it is a different picture. Just 5 (11.3%) moved into more permanent or long-term placements, with three of these being from existing long-term placements that had broken down. 21 (47.7%) of these moved into a children's home

For the 33 children aged 16+, 17 (51.5%) moved into registered or unregistered supported accommodation. The majority of our children are now in registered supported accommodation provision.

Short-Term Placement Stability - Children in Care with three or more Placements during the year



Percentage of Children Placed more than 20 miles from Home



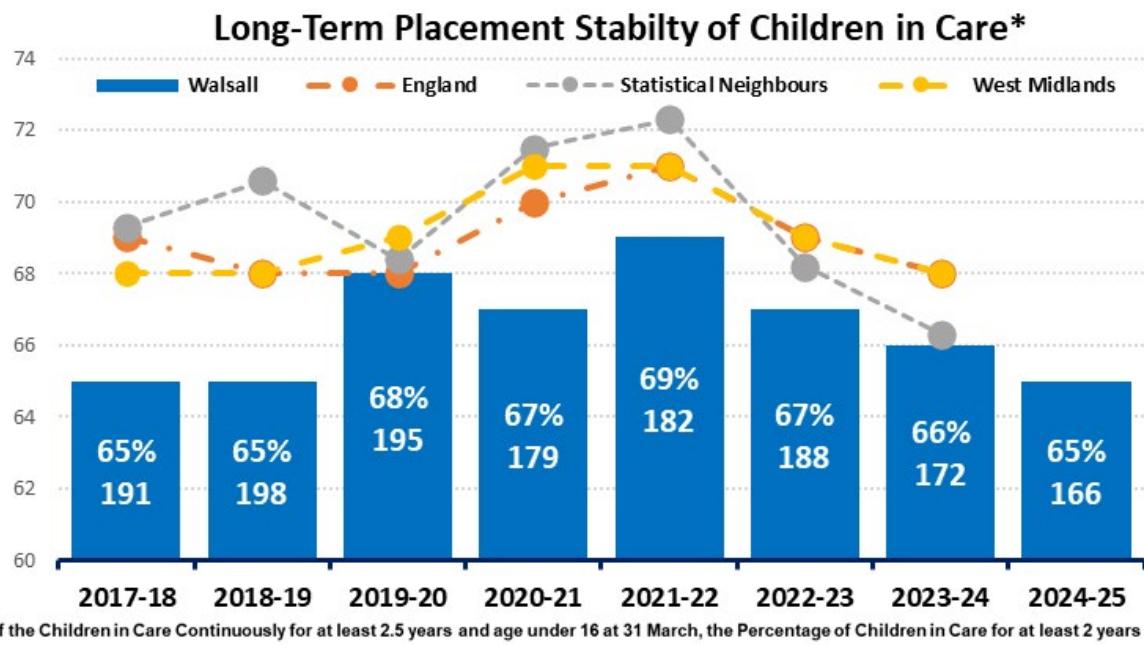
When the same cohort is limited to children who have been in care for at least 12 months, 131 have had at least one placement move. The proportion of children in the 5-9 and 10-15 age cohorts with placement moves is in line with the proportion of children in those age cohorts in total, however, the proportion of children in the 1-4 age cohort with a move is 37.5% compared with just 27.1% in the cohort overall and the proportion of young people aged 16+ in the cohort with a move is 30.8% compared with 27.1% in the cohort overall.

36.7% of children aged 1-4 who had been in care 12 months experienced at least one placement move, compared with 27.2% of children aged 5-9, 25.3% of children aged 10-15 and 29.6% of children aged 16 plus.

However, when the type of moves is looked at:

For the 24 children aged 1-4, more than half the moves were to more permanent or long-term placements, either adoption, return to parents or moves to long-term fostering from a short-term placement. Just 12 moved from one short term placement to another.

For the 30 children aged 5-9, shows 6 (20.0%) moving to more permanent or long-term placements and 19 (43.1%) moving from one short term place to another. Five of these children in either age group moved into a children's home.



7. Conclusion and next steps

The data analysis shows that while the number of children who are entering and remaining in care is reducing overall, there are some significant changes in both demographics and needs which have an impact on placement sufficiency.

The increase in the proportion of older boys with more complex needs who are more likely to enter residential care is something that needs careful consideration when planning the commissioning of placements to ensure that suitable homes can be found. The work being done in relation to support services will also benefit this demographic.

The Sufficiency Strategy sets out how we will ensure that there are sufficient placements in Walsall to address these changing needs and how support services will help to prevent children from entering care or support them and their families to facilitate a return home.



Children's Services

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