

CABINET ITEM COVERING SHEET PROFORMA

AGENDA ITEM

REPORT TO CABINET

14 FEBRUARY 2019

**REPORT OF SENIOR
MANAGEMENT TEAM**

CABINET DECISION

Cabinet Member for Children and Young People – Cllr Mrs McCoy

CHILDREN IN NEED REPORTING IN REVIEW

1. Summary

This report seeks Cabinet approval for the recommendations agreed by the Children and Young people Select Committee in respect of a reporting-in review on children in need. This review focused on the way the Council is seeking to ensure effective support for children classed as children in need, whilst managing demands on social care teams.

2. Recommendations

Cabinet is asked to agree the recommendations:

1. To continue to prioritise an ongoing proactive approach to ensuring that social workers are only involved where there needs to be statutory social care involvement;
2. To ensure that further reviews of early help services prioritise the ability to be able to intervene early and prevent families from requiring social work intervention. This will include work on the development of a clear offer of help and support;
3. Continuing to be proactive in the auditing of cases to ensure cases are not 'stuck' or are remaining open to social care when they do not need to be;
4. The ongoing use of signs of safety meetings early in the assessment process to provide a means of co-designing a response with families
5. The extension of family group conferencing into early help work, as this is providing to be an effective means of working with families restoratively and therefore avoiding the need for statutory social care involvement;
6. The development of work across early help and social care around the role of family workers in the management of cases which do not require social work involvement;
7. To continue to work with partner agencies around the management of risk, information sharing and alternatives to social care involvement.

3. Reasons for the Recommendations

To ensure that the Council continues to prioritise the needs of children in need, whilst making the most effective and efficient use of resources.

4. Members' Interests

Members (including co-opted Members) should consider whether they have a personal interest in any item, as defined in **paragraphs 9 and 11** of the Council's code of conduct and,

if so, declare the existence and nature of that interest in accordance with and/or taking account of **paragraphs 12 - 17** of the code.

Where a Member regards him/herself as having a personal interest, as described in **paragraph 16** of the code, in any business of the Council he/she must then, **in accordance with paragraph 18** of the code, consider whether that interest is one which a member of the public, with knowledge of the relevant facts, would reasonably regard as so significant that it is likely to prejudice the Member's judgement of the public interest and the business:-

- affects the members financial position or the financial position of a person or body described in **paragraph 17** of the code, or
- relates to the determining of any approval, consent, licence, permission or registration in relation to the member or any person or body described in **paragraph 17** of the code.

A Member with a personal interest, as described in **paragraph 18** of the code, may attend the meeting but must not take part in the consideration and voting upon the relevant item of business. However, a member with such an interest may make representations, answer questions or give evidence relating to that business before the business is considered or voted on, provided the public are also allowed to attend the meeting for the same purpose whether under a statutory right or otherwise (**paragraph 19** of the code)

Members may participate in any discussion and vote on a matter in which they have an interest, as described in **paragraph 18** of the code, where that interest relates to functions of the Council detailed in **paragraph 20** of the code.

Disclosable Pecuniary Interests

It is a criminal offence for a member to participate in any discussion or vote on a matter in which he/she has a disclosable pecuniary interest (and where an appropriate dispensation has not been granted) **paragraph 21** of the code.

Members are required to comply with any procedural rule adopted by the Council which requires a member to leave the meeting room whilst the meeting is discussing a matter in which that member has a disclosable pecuniary interest (**paragraph 22** of the code)

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DETAIL

Context

1. This reporting in review is a short study which aims to draw together a range of current activities, plans, research and proposals to support the Council's work with children in need (CIN).
2. The first report was presented to Committee on 7 November.
3. The main purpose of this review work was to seek endorsement to our work on those children subject to a child in need classification and plan, especially around:

- a. Understanding thresholds and decision making
 - b. The reasons for a high proportion of CIN cases closing within 3 months (and if cases could have been managed through early help)
 - c. Our approach to step down of cases to early help
 - d. Quality of plans
 - e. The role of partners in managing risk
4. The work has drawn specifically on the outcomes from the Joint Targeted Area Inspection in November 2017 which, whilst focused more broadly on issue of neglect, made some recommendations on the effectiveness of care planning.

Summary of key points

5. The specific focus of the work has been around:
- a. an assessment of data – the volume of referrals and trends;
 - b. the extent to which child in need cases (i.e. those that have been deemed worthy of statutory social work intervention) can be stepped down either during the assessment phase or as soon as possible once work has been completed;
 - c. the impact of recent work across social care teams on the opportunities to close or step down cases – this has resulted in a significant reduction in CIN cases;
 - d. the impact of current approaches, and especially:
 - i. The use of the Graded Care Profile tool, which helps families to understand concerns and what can be done, working with agencies, to reduce concerns;
 - ii. The role of early help and information and guidance on providing information for families to help them to manage risks and concerns;
 - iii. The support which is available during the time an assessment is being undertaken, which can often reduce the level of risk and avoid the need for ongoing social work involvement;
 - iv. The use of signs of safety in the assessment stage which also helps to work with families and engage them in understanding levels of risk and their role in helping to address this;
 - v. The contribution of the Family Group Conference service which provides a mechanism for wider family networks to address issues. This is a relatively new service introduced in December 2017.

Areas for recommendations

6. The key focus of the review, is to seek to reduce the volume of work and the child in need rate, by focusing on alternative approaches which better meet the needs of families, and which reduce the need for social worker involvement to assist in the management of demand.

Committee Response

7. The Committee welcomed the opportunity to consider in detail the work to address the volume and service demands associated with the number of Children in Need plans.
8. The review has particularly focussed on:
- a. understanding thresholds and decision making;
 - b. the reasons for a high proportion of CIN cases closing within 3 months / whether these
 - c. could have been managed through Early Help;
 - d. the approach to stepping down cases to Early Help;

- e. the quality of CIN Plans;
 - f. the role of partners in making referrals and managing risk.
9. A range of new approaches and techniques have been put into place over the course of the review, with further developments planned. These included case audits, consideration as to whether children required statutory social work involvement or another form of support, family group conferencing, and ongoing use of tools such as Signs of Safety to develop a response in partnership with families.
10. Members highlighted a number of issues during their discussions:
- a. it was recognised that some CIN cases were held open for too long due to a risk averse approach and that some could either be closed or safely stepped down to Early Help where the risks could be safely managed without the need for the involvement associated with CIN status;
 - b. the positive introduction of Family Group Conferencing. This evidence-based approach involved working with families at the point of assessment, and enabling them to reach their own solutions where possible. This relatively new service was well regarded by families, courts, and social workers. The Committee welcomes the potential extension of this work into Early Help;
 - c. Family Workers were increasingly being used in case management that did not require social work involvement. This helped families as they often preferred to be seen engaging with a ‘family worker’ rather than a ‘social worker’;
11. It is recognised that working with partners to improve the quality of referrals and their approach to managing risk needed to continue on an ongoing basis. In recent years the Children’s Hub had successfully brought together partner organisations and this was seen to be improving referrals; education and police leads located within the Hub were able to both collect information from partners but also provide feedback and challenge where referrals may be inappropriate.
12. For the first two quarters 2018-19 there was an increase in CIN referrals compared to the same period the previous year; there had also been a 30.9% increase in the number of CIN cases that were closed in comparison to the same period.
13. The total number of referrals potentially indicates that there is more work to do regarding the understanding of thresholds and opportunities to provide support at an earlier opportunity. However the increase in CIN cases being closed would indicate that recent work has had a positive effect.
14. The Committee was pleased to see the substantial amount of work that had taken place across the review’s various strands. Members endorsed the approach to reducing referrals and closing cases where possible, but would request ongoing assurance that the level of risk within this approach is being managed appropriately. It was agreed this would need to be kept under constant review due to the differing needs of children and the factors that may lead to the escalation or de-escalation of the response to their situation.
15. Members endorsed the outcomes and recommendations in the CIN Review. The Committee also placed on record its appreciation of the Council’s social work teams and the challenging work they undertake.

COMMUNITY IMPACT IMPLICATIONS

16. There are no direct implications arising from this report.

FINANCIAL IMPLICATIONS

17. There are no direct financial implications arising from this report. Children's Services will continue to seek to manage demand, and ensure that children and young people receive support as detailed in assessments and in care plans.

LEGAL IMPLICATIONS

18. There are no specific legal implications from this report

RISK ASSESSMENT

19. The issues in this report are categorised as low to medium risk. Existing management systems and daily routine activities are sufficient to control and reduce risk.

COUNCIL PLAN POLICY PRINCIPLES AND PRIORITIES

20. The issues in this report align closely with the Council Plan priority to protect the vulnerable through targeted intervention, as the categorisation of a child, as being 'in need' is an early indication of the need for support in the family to prevent risks escalating.

CORPORATE PARENTING IMPLICATIONS

21. There are no specific implications for corporate parenting. Early identification of risk, and a clear and suitable plan working with families is key to avoiding any family breakdown and the potential need for children to come into care.

CONSULTATION INCLUDING WARD/COUNCILLORS

22. The Cabinet Member for Children and Young People has been consulted, and the recommendations have been endorsed by the Children and Young people Select Committee.

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Education related? No

Background Papers

Ward(s) and Ward Councillors:

Property - no implications

Annex 1

1. Contents

1.1 This annex provided the details of the work considered as part of the review

2. Legislation

2.1 A Child in Need (CIN) is defined under the Children Act 1989 as a child who is unlikely to achieve or maintain a reasonable level of health or development, or whose health and development is likely to be significantly or further impaired, without the provision of services; or a child who is disabled. Children in need may be assessed under Section 17 of the Children Act 1989 by a Social Worker. This includes Children in Our Care, children subject of a Child Protection Plan, Disabled Children and children who are supported by a Social worker whereby intervention is not statutory.

2.2 The majority of Children in Need experience or are at risk of emotional, physical or sexual abuse or neglect in their home environment. For many Children in Need, challenging circumstances within their families are likely to mean that their parent's capacity to meet their needs has been reduced: domestic abuse is a factor in half of cases; parental and/or child mental health in more than one in three; and drug or alcohol misuse in every one in five. Being in need can equally result from parents and carers' health conditions or disabilities, and the caring responsibilities this places on children. For others, particularly adolescents, the threats that they face may be external, such as child sexual and criminal exploitation.

2.3 Episodes of need may be characterised by chaotic home environments, instability in a child's day-to-day life, and uncertainty, inevitably influencing children's physical, mental, emotional, and social wellbeing. Whilst children are affected by such episodes in different ways, often depending on the strengths and protective factors within their families or wider support networks, research indicates that experiences of trauma or adversity in childhood are associated with atypical development and can have a profound impact on a child's ability to "think, interact with others, and learn.

3. Data

3.1 Nationally

Between April 2017 to March 2018 there was a total of 406,770 referrals. This is an increase of 1.5% on the previous year whereby the total referral was 400,100.

The numbers of referrals closed during the same period fell from 353,860 to 349,130 a decrease of 1.3%

3.2 Stockton-on-Tees Borough Council

Between the period of April 2017 and March 2018 we received a total of **2334** new CIN referrals.

In comparison to the previous year April 2016 to March 2017, we received a total of **2360** CIN referrals.

This is a **1.1%** decrease in 2017-18, (26 referrals in total).

In the first 2 quarters April 2018 to September 2018 we received a total of **1178** CIN referrals. In comparison to the previous year first 2 quarters April 2017 to September 2017 we received a total of **1030** CIN referrals.

This is a **14.4%** increase in Apr-Sep18, (148 referrals in total).

If this trajectory continues this will result in an increase on referrals from the previous year albeit this is likely to be only small percentage. The increase in referrals is most likely to do with the following:

- Professionals not always clear about thresholds
- Professionals not always clear about alternative support systems
- Poverty and abuse is increasing for children within the borough

- Support has not been identified at the earliest opportunity before concerns escalate.

Between the period of April 2017 and March 2018, **2223** CIN cases were closed in total.

In comparison to the previous year April 2016 to March 2017 where **2492** CIN cases were closed.

This is a **10.8%** decrease in 2017-18.

In the first 2 quarters April 18 to September 18 we closed **1443** CIN cases.

In comparison to the previous year first 2 quarters April 17 to September 17 we closed **1102** CIN cases.

This is a **30.9%** increase in April - September18.

The above closure figures are most likely to be due to the following:

- There is an increased understanding across Children's Statutory Services about what support is available externally. This has been enhanced due to the close working relationships between the Youth Direction Services and Early Help allowing cases to close or step down at a much earlier stage.
- Family Group Conferencing (FGC) are working with more families at the point of assessment, enabling families to reach their own solutions to support their children, again allowing cases to close at an earlier stage.
- Following assessment the initial concerns as identified at the point of referral are not deemed to meet statutory intervention.
- Safety Planning meetings held during the assessment period allow for parents to fully understand concerns and for them to be a significant part of the planning and solution.

- Following on from the evaluation of cases within Assessment and Fieldwork Teams the culture of closing cases or stepping them down at the right time has been reinforced with managers and practitioners.

4. Research

4.1 The Department for Education updated the Policy Paper (10/12/18) Improving the Educational Outcomes of Children in Need of Help and Protection (Interim Findings), previously published in March 18. They reviewed the support for children in need to help us understand why their outcomes are so poor and what further support they might require.

4.2 They gathered qualitative evidence with 600 responses from schools and children's social care practitioners across England to understand why children in need of help and protection fall behind and what helps them achieve their potential. Additionally a literature review was conducted by the Early Help Foundation and there were deep dive visits and structured conversations with Local Authority senior managers and social workers across children's social care and health, teachers, head teachers and school designated safeguarding leads, virtual school heads, voluntary and charity sector organisations, academics, and children and young people themselves. They also involved the 3 'what works' center's in the assessment of the evidence:

- Education Endowment Foundation
- Early Intervention Foundation
- What Works Centre for Children's Social Care

4.3 The following are the findings to date:

The impact of trauma or adversity is compounded by the frequency of transitions that Children in Need experience. Children in Need are more likely than other pupils to move schools and to join schools at unusual points in the school year 5.

4.4 Other significant transitions affecting Children in Need include: -

- Moving between schools and/or phases in education
- Moving between different stages of statutory social care support, such as a Child in Need Plan, Child Protection Plan or being Looked After
- Moves to new placements, or moving out of care, including returning home, or through a permanence order
- Moving home, or adults moving in and out of the home
- A change in the practitioners working to support them
- Moving between children's and adults' services

4.5 During these transitions, children are likely to be worried about what is happening and why, support can drop off or be delayed, and difficulties at home or school can escalate. For many Children in Need, the stability of existing coping mechanisms or

support systems is at particular risk during transitions, where parents experiencing difficulties themselves can struggle to support their children through change.

4.6 **What is Needed:**

- Strong leadership and shared goals that establish high aspirations for the educational outcomes of Children in Need.
- Skills and training to recognise the impact of trauma or adversity and to understand children's behaviour – enabling effective assessments of children's needs and long-term planning, particularly around transitions
- Inclusive whole school approaches that support Children in Need, making in-school adjustments that promote educational outcomes, an increased focus on educational outcomes, which is not a change in direction but an aspiration. Safety should always come first but it is not an end goal.
- Good relationships with children and families, through clear communication, empathy and advocacy, underpinned by stability and consistency of support
- Effective multi-agency working, targeted interventions and information sharing between agencies, with confident judgements to share information that respect the agency of children and families

4.7 **Children's Commissioner**

England now spends nearly half of its entire children's services budget on 73,000 children in the care system – leaving the other half for the remaining 11.7 million children. Research undertaken by the Independent Fiscal Studies 2018 has shown that 77% of Children's Services support went on Children in Care or in Crisis situations – This picture would be reflective of Stockton's experience.

Children do not arrive in extreme need overnight and many could be prevented from getting to that point if we helped them sooner in a more effective way. We are, in effect, attempting to manage and contain crisis in children's lives after allowing it to escalate. The economic and social costs are unsustainable. The cost to the state will ultimately be greater, but it is the lifetime cost to these children which we should be most troubled by. They only have one childhood, one chance to grow up. Already we see the costs of helping children later in life, or of allowing greater numbers to become marginalised – in the current pressures on family courts, special schools and the care system; in spiralling numbers of school exclusions and the consequent increase in younger and younger children linked to violent street gangs.

(Anne Longfield OBE, Children's Commissioner for England)

5. **Update on Next Steps as Reported under S7 Child In Need Reporting Review October 2018**

5.1 *Continue to prioritise Graded care Profile 2.*

This is becoming a well embedded tool used across Children's Services and Early Help where neglect is a feature. It is a tool often used in conjunction with health and

can be utilised to feed into the overall assessment of a families circumstances. Nearly all Family Support Workers in Early Help and Children's Services have received training in order to carry out the Graded Care Profile.

5.2 *Further development of the Stockton Information Directory. Improving communication for families and professionals with Children's Services. Provide more effective support and information to Social Workers on community based resources.*

The Stockton Information directory has recently been redesigned, this includes the SEND Local Offer and Adults area as well as the Families area. The family area has been renamed Children, Young People and Families and now includes a category for Early Help named Help Point. A dedicated area of resources, good practice and useful websites has also been created for Social Workers, which is due to be launched in January 2019. A Care Leavers Local Offer has also been designed in consultation with Stockton Care Leavers, this area will be launched early 2019.

5.3 *Report/evaluation regarding recent closures and step downs.*

Fieldwork Team	Number of cases Audited	Cases closed Naturally during auditing process	Cases identified to close and to be stepped down to Early help or TAF	Cases identified to close with no additional support required
North 1	124	25	24	25
North 2	73	5	9	36
North 3	121	6	17	19
South 1	102	9	15	16
South 2	97	15	12	21
South 3	122	9	5	33
Total	639	69 (10.7%)	82 (12.8%)	150 (23.5%)

Between April 2018 and July 2018 a piece of work was undertaken analysing open Child in Need cases. This followed on from an audit whereby it was identified that cases did not appear to be closing or stepping down to Early Help or Team around the Family in a timely manner often resulting in the drift of cases. As part of the analysis all cases across Fieldwork and Assessment teams were audited, with recommendations made following this, which were then acted upon. The outcome of this is detailed below

In total 47% of cases were found to either need no further intervention or intervention that could be provided by another service or professional.

Within the Fieldwork Teams it was noted that a number of CIN cases were open to the Fieldwork teams yet no direct work/ intervention with the family was being undertaken, the types of cases included the following:-

- No recourse to public funds
- Cases subject to an ongoing police/ criminal investigation (case had been risk assessed and no known concern noted)
- Subject to ongoing supervised family time

There is no statutory responsibility for these cases to be open to a social work team yet they are presently forming part of a Social Workers caseload as there is no alternative place for cases of this nature to be held.

Additionally, many Child Arrangement Orders (CAO's) and Family Assistance Orders (FAO's) are open to the Fieldwork teams yet there is no specific identified role for social care other than to generally advise, assist and befriend or to financially support a person named on the order. These cases are also forming part of a Social Workers caseload as there is no alternative place for cases of this nature to be held.

Some cases were open for monitoring purposes only which is not a good use of Social Workers time.

Additionally an audit was undertaken of 219 cases that had been referred to the Assessment Team during July 2018. The outcome of this is detailed below: -

Assessment Team	Number of cases Audited	Cases Identified to close with no further action	Cases identified for additional support by either Early Help or TAF
	219	71 (32%)	90 (41%)

It is notable that 100% of the Single Assessments completed during July 2018 were assessed to be appropriate at the point of receipt and yet a substantial proportion (75%) of these were assessed to require no ongoing statutory social work following completion of the Single Assessment. The Team Manager's view in respect of this disparity was as follows:

- From the point of allocation the social worker commences their assessment, during this time they assess need and proactively broker other resulting at the point of closure the family's identified needs have been met or will be met in the near future.
- Improved relationships with Youth Direction colleagues. The interface with this service is described as excellent. Youth Direction have a substantial range of services that can be accessed to support families. A social worker will regularly broker a service from Youth Direction during the assessment phase and whilst this progresses a relationship develops between the worker and the family to an extent where the case can close to social care/ be stepped down and Youth Direction will continue involvement due to the relationship that has been built and the progress made.
- By having the 45 day assessment period, this allows for a much fuller assessment of need which in turn reduces the need to transfer the case to a fieldwork team for a more in depth assessment.

- The use of relationship based approaches within the teams. Where opportune, the social worker will coordinate a Signs of Safety meeting with the family. This provides the basis for transparent partnership working and enables a forum for the family to understand the concerns social care hold, promotes them having ownership of the issues and affords them an opportunity to acknowledge these concerns and to create a plan that suitably addresses and minimises ongoing concern. These meetings greatly improve relationships, support partnership working and are solution focused in their approach, the outcomes of these meetings to date have served to reduce the need for ongoing social care intervention.
- Having access to the Family Group Conference (FGC) service during the assessment phase. This approach supports the building of relationships, acknowledges that the family are the experts in their lives and is solution focused in its approach. The plans created with families have contributed towards reducing the need for ongoing social work intervention. Additionally, on occasion through the use of an FGC, children have been successfully diverted from becoming looked after or where a child has been accommodated the FGC has provided additional information to support the evidence base for this decision.
- That greater clarity and exploration of concern at the point of referral is required. Often when the assessment commences, the information checked does not correlate with that in the referral. On occasion it is felt that concerns may have been overemphasised by partner agencies to ensure an assessment is commenced by social care and the responsibility is taken out of their hands.
- Having Family Workers seconded from Early Help based within the team promotes the sharing of information in relation to the services that can be provided to support the identified needs within a family, assists in building relationships between the service areas and has successfully supported cases progressing to step-down arrangements in a quality and expedient manner.
- The review of cases was not just successful in creating capacity but also in developing a culture across the service of asking the question 'why is a Social Worker the best person to be involved in this case' is there another professional who has the skills and capacity to support the family more effectively'.

5.4 *Evaluation of Signs of Safety documentation once embedded to ascertain that they are impacting positively on practice.*

The language and ethos of Signs of Safety started to be included in documentation in April 2016. The Signs of Safety approach allows for a strength based approach, It uses simple language, is family friendly and child focused.

Since this time a suit of documents have developed further with a much clearer focus on the Assessment Framework and to ensure care planning is captured clearly.

In September 2018 the Supervision document (used between Managers and Social Workers) was altered to evidence existing planning, it has a focus on neglect and now a larger focus on children in care or children not residing with birth parents and whether this arrangement is still appropriate and if so why. It also focuses on family time between children and their families to ensure that significant connections are not lost in planning. There is also clear evidence of the voice of the child and direct work undertaken.

More recently further work has been undertaken on the child's care plan, with a view that one care plan should be used across statutory services whether a child is a Child in Need, subject of a protection plan or a Child in Our Care. Children often move through this continuum and it important that's the plan remains fluid, and is not lost in transition and the journey for the child is very clear.

5.5 *Expand the Family Group Conference Service to include Child in Need Cases, Early Help cases and Reunification cases for Children in our Care.*

To date the team has received 357 referrals (relating to 764 children) and have worked alongside families to help develop 159 FGC plans, carried out several restorative meetings with family members and have helped to provide key information to assessing social workers to inform their assessments and interventions.

Such has been the demand for FGCs that we employed a further FGC Practitioner in August, 2018, joining the four practitioners already in post. We have also recently promoted one the of FGC Practitioners to Senior FGC Practitioner, in order to help the FGC Co-ordinator with allocations, supervisions, case closures, training and development of staff. She will commence in her new post in January 2019.

The FGC team have recently moved within Stirling House to be co-located alongside the Assessment Teams. This makes sense, given that a large proportion of FGC referrals come from social workers within the Assessment Teams and being co-located has increased referrals further. The most useful part of being close to the Assessment Teams is that we are getting involved with case discussions at a much earlier stage and helping to run FGCs with families at this really early stage in the process which, in turn, helps the assessing social workers to make decisions regarding whether cases need to go into child protection or child in need or not. Also, we have helped to step down many cases to our Early Help teams through the use of FGC we have also been very accommodating regarding running emergency FGCs in order to help 'shore up' family resources whilst the social worker assesses.

We are also receiving more and more referrals from the Early Help teams and we have decided to work with many of these cases in order to prevent escalation into the Assessment and Fieldwork Teams. We have had some real success in this area, however, if this increase in referrals from the Early Help end of the continuum continues, we will need more capacity in terms of staff, to cope with the numbers of referrals.

In May 2018 a Domestic Abuse Worker from Harbour was seconded to the FGC Service and she has become a well embedded and invaluable part of the service. We have noticed a trend of parents being more likely to engage with domestic abuse services when introduced by the FGC workers rather than the social worker. Families appear to feel less threatened by the FGC staff. This model has worked so well that

we will be replicating this with a substance misuse worker from CGL substance misuse service in March 2019. We will be interviewing existing substance misuse workers at the end of January and will have a worker embedded within the FGC Service by February/March time. This is a really exciting and innovative development that works well for our social work teams and our partners (Harbour and CGL) in that both services can learn a lot from each other in terms of practice and processes and social workers have quick access to information regarding families from our partners. Also, the Harbour worker has and the CGL worker will benefit from being part of a team steeped in restorative methods of working and will take more of a 'whole family' approach to their work. We feel that this model could be replicated with other partner organisations in the future and we have had some initial discussions with CAMHS recently.

5.6 *Ensure that there is a process in place for the exchange of information from and to CRC and NPS.*

A Notification Task Group is underway with this work. Initially we are looking at a notification system between the CHUB and health. However this will be expanded to other agencies and will include notifications for cases which have been opened to Children's Services and Early Help alongside those cases where a decision was made to take no further action.

5.7 *Evaluation of review of Early Help Services. Reshaping family support into a new Family Solutions Service and offer. Introducing a flexible model of working with young people and families who need more intensive support. Continuing to develop a 'secondary prevention' approach to reduce risk in target communities. Streamlining systems and processes for early help, working with the Children's Hub. Focus on therapeutic interventions. Consider/review other commissioned models of support i.e. 'fresh start families' and AMAST, Unborn babies Team. Better use of our Family Workers with more emphasis on bespoke parenting packages. Improve partners' knowledge of threshold in order that the most appropriate professionals/services become involved with the family in the early stages of problems developing as well as professionals having a clear understanding of the Early Help Offer and statutory offer.*

The review of both Early Help and Statutory services is currently underway. There has been work undertaken on what is needed and what are the gaps. The views of staff across the service has been undertaken to seek a wider view of 'what works and what doesn't'. Alternative models of working are currently been considered

5.8 *An audit tool will be developed with the purpose of auditing cases that have recently stepped down to Early Help or stepped up from Early Help to Children's Services with an aim to identify any learning. This is to commence on a monthly basis from November 2018. Any learning will be disseminated to the workforce.*

This has not yet started.

5.9 *Evaluation of review of Children's Services, including where workers are based and what teams would function the most effectively to provide support to families. What additional support is needed externally via Early Help and other agencies and professionals to support statutory engagement and progress?*

As above in 5.7

6. Future Recommendations

- 6.1 Ongoing review of our numbers of CIN cases with an aim to either 'step down' or close those where it is appropriate to do so.
- 6.2 Establishing other key agencies/specialist to sit within the FGC team. Expanding the team to ensure capacity in order that FGC can be incorporated across all of Children's Services. FGC to undertake work as part of the Children in Our Care review to include children coming home and going home. To undertake work to look at how the FGC plan can be incorporated into the one care plan that has been developed.
- 6.3 Cases that do not require social work intervention such as family time arrangements, police enquiries, No Recourse to Public Funds and Family Assistance Orders to be managed outside of Statutory Services.
- 6.4 Stronger links between Education and Children's Services ensuring care planning incorporates the needs of children in all settings. Additionally stronger links between external resources and Children's Services particularly the Assessment Team where it is evident these links are allowing for a greater number of cases to be supported outside of statutory services. Potential ways to do this will be explored as part of the review set out below.
- 6.5 Continuation of the review of statutory services and Early Help ensuring the right services are available to meet need, that there is no duplication amongst services, and that professionals understand the thresholds for intervention and where that intervention is best met.
- 6.6 Strong leadership and shared commitments and goals between agencies.
- 6.7 Effective multi-agency working, targeted interventions and information sharing between agencies, with confident judgements to share information.
- 6.8 An audit tool is developed with the purpose of auditing cases that have recently stepped down to Early Help or stepped up from Early Help to Children's Services with an aim to identify any learning. This remains outstanding and was due to commence on a monthly basis from November 2018. Any learning will be disseminated to the workforce.
- 6.9 Further work and processes to be continued regarding the sharing of information and notifications between agencies.

Maria Murrell

Service Manager

Fieldwork

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/762527/Characteristics_of_children_in_need_2017-18.pdf

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/762826/Children_in_Need_of_help_and_protection-Interim_findings.pdf

<https://www.childrenscommissioner.gov.uk/wp-content/uploads/2018/06/Public-Spending-on-Children-in-England-CCO-JUNE-2018.pdf>