

Committee: Children and Young People Scrutiny Panel

Date: 16th April

Agenda item: 5

Wards:

Subject: Early Intervention and Prevention Strategy

Lead officer: Paul Ballatt, Head of Commissioning, Strategy and Performance

Lead member: Cllr Maxi Martin

Forward Plan reference number: N/A

Contact officer: As Above

Recommendations:

- A. To note the changes in Merton's approach to early intervention and prevention services.
-

1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1. This report advises panel members of changes in Merton's approach to the provision of early intervention and prevention (EIP) services. It describes the rationale for making these changes and provides details of new services, both in-house CSF department services and those commissioned externally.

2 DETAILS

- 2.1. Local authorities have a range of statutory responsibilities in respect of children who require safeguarding, who become looked after or who are 'in need'. It is in the best interests of children, families and public services for the additional needs of children to be identified and met as early as possible - put simply, children's needs are generally best met within their own families and kinship networks; families have rights to receive support to enable children to achieve positive outcomes; as children's additional needs escalate, positive outcomes are harder to achieve; when additional needs escalate into risks, local authority intervention becomes significantly more intrusive and more expensive.
- 2.2. Local authorities and their partners need to have in place, therefore, a supportive and protective framework of services which can address effectively this continuum of additional needs and risks which children and young people may experience at any stage of their childhoods. The focus of this paper is on what are known as 'early intervention and prevention' services working with children and young people at a lower level of need than those specialist safeguarding, looked after children and youth offending services with which Panel members will already be very familiar.
- 2.3. Merton has had a longstanding commitment to investment in EIP services and a well-established operating model - our Child Wellbeing Model (CWM) and the Common Assessment Framework (CAF) - to enable the early

identification of children and young people with additional needs and timely referral to appropriate services.

2.4. Previous inspections of children's services in the borough, notably the Joint Area Review in 2007 and the Safeguarding and Looked after Children inspection in 2012, have considered our approach to early intervention and prevention to be strong. It has also been considered as effective in enabling Merton to maintain relatively low numbers of children subject to child protection plans and looked after.

2.5. There have been a number of recent drivers, however, for officers and partner agencies to take stock and review EIP services locally:

- The growing body of research into evidence based models of early intervention and prevention highlighted, for example, in the national Graham Allen and Munro reviews and by bodies such as C4EO.
- The increased focus in inspection on the specific impact for specific children and young people which EIP services have on outcomes – with case tracking by inspectors of early intervention and prevention 'cases' now a major element in the new Ofsted inspection framework
- The statutory requirement on Local Safeguarding Children Boards to assure themselves of the adequacy and effectiveness of EIP services
- The financial context of significant pressures on local authority budgets requiring services to make best use of resources available and, in doing so, to improve the targeting of services

2.6 Our local review, undertaken by CSF department officers with Children's Trust partners, had three main components: i) the effectiveness of our current CWM and CAF arrangements in terms of the early identification and assessment of additional needs in children; ii) the effectiveness of in house and commissioned services in meeting needs identified and in preventing escalation to more specialist interventions and iii) a desktop review of models of early intervention identified in the research.

2.7 A number of key learning points emerged from the review:

- The existing CWM had high levels of recognition by practitioners working with children and young people across services in the borough. It was seen as a helpful framework for workers to consider the additional needs of children and young people with whom they were working. However, although the model identified five 'levels' of need in children, there were not five 'levels' of service responses and some simplification of the model was, therefore, seen as helpful
- Although many CAFs produced were of high quality, plans emerging from these assessments were often less so and lacked co-ordination as the lead practitioner role (introduced as a 'best practice' proposal by the previous government to support the implementation of plans emerging from CAFs) was not universally embedded in agencies in the borough. Too many CAFs were used as referral forms to specific services rather than as a tool for assessment of need

- CAFs completed were typically specific to single children and missed, therefore, opportunities for an assessment of the needs of all children in a family and, indeed, a whole family focus.
- There was evidence of duplication in the EIP service 'offer' delivered by CSF department and externally commissioned services. Examples included parenting programmes and general family support services
- An analysis of CAFs showed that there were a number of key characteristics in families identified as needing earlier support – parental mental health issues; parental learning disability; parental substance misuse and domestic violence

2.8 This learning has been used over the last few months to implement a number of key changes, mandated both by the Children's Trust Board and departmental management team, to our approach to early intervention and prevention in the borough.

Child Wellbeing Model

2.9 We have simplified the model to describe for workers of all disciplines three levels of children's services provided in the borough.

Universal Level – All children can access universal children's services - for example schools and early years settings. Many universal services also offer some elements of targeted EIP services – eg speech therapy in schools; primary health advice in children's centres. High quality universal services form the foundation stone for the prevention of escalating needs in children.

Enhanced Level – Some children will have needs which cannot be fully met in universal services. Except in emergency situations where children are at risk of significant harm, enhanced level services should be considered. These enhanced level services form the core of Merton's future EIP offer – see specific section below.

Specialist Level – These services work with children who are the most vulnerable and have the most significant needs – eg where there are safeguarding concerns; children looked after by the local authority; children with Special Educational Needs and disabilities and young offenders.

Common and Shared Assessment

2.10 We have refined and developed existing CAF forms and guidance to be known, in line with language used by central government, as Common and Shared Assessment (CASA). This form of assessment will typically be undertaken when a child/children in universal settings is/are seen to have additional needs but not considered to be at risk of significant harm. The practitioner in the universal settings will initiate and complete a CASA and will seek to draw together a 'team around the child/family' to contribute to this assessment and action plan to address needs identified. Our old CAF forms and guidance have been amended to enable the more 'whole family' approach noted above and a focus on strengths, resilience and protective factors as well as deficits and 'problems'. The documentation also promotes sharper action planning arising from the assessment and regular reviews of progress.

New Enhanced Level Services

- 2.11 The core of our new approach to early intervention and prevention consists of new enhanced level teams established within the CSF department and new externally commissioned services.
- 2.12 Two age related teams – 0-5 Supporting Families Team and 5-18 Vulnerable Children’s Team – are being established which will work with children, young people and their families whose needs cannot be met entirely within universal level services but are not, at the point of referral, of such concern that specialist level services are required. These teams will be multi-disciplinary with social work, family support, parenting and primary mental health staffing.
- 2.13 The teams will adopt a casework and case management approach with social work practitioners leading the completion of assessments and implementation of plans arising from these assessments supported by family support workers and other practitioners within the teams and by commissioned services. The allocation of work to specific social work practitioners will strengthen both the co-ordination of work with families and the accountability for achieving the desired outcomes of this work.
- 2.14 Importantly, these teams will also provide advice, guidance and support to universal level services when concerns arise in connection with children or young people with whom they are working. This support will help universal level services ‘contain’ children and young people at this level or give confidence to universal level services that referral on to enhanced or specialist level services is appropriate and necessary.
- 2.15 At least for the duration of the 3 year programme currently underway, Merton’s Transforming Families Service will be a further enhanced level service working with families, the majority with adolescent children, who are at the threshold of requiring more intrusive service interventions.
- 2.16 Consistency of work referred to these teams and the level of need in families with whom they work will be achieved as all referrals will be channelled through the newly established Multi-Agency Safeguarding Hub (MASH).
- 2.17 The work of the new in-house enhanced level teams will be supported by a range of newly commissioned services provided, largely, by local community and voluntary organisations. The commissioning process for these services is currently being completed and new services for April 2013 onwards will include specific services to support families with parents who have mental health issues or learning disabilities and families with domestic violence issues; services to promote parenting skills; work with ‘runaway’ children and those at risk of sexual exploitation; specific ‘respite’ services for children with disabilities and their families and positive activities for young people.
- 2.18 We will also continue to deliver evidence based early intervention approaches including multi-systemic therapy and accredited parenting programmes. Merton is also due to become a site for delivery of the Family Nurse Partnership initiative which is a highly recognised model of engagement with families with young children to promote improved parenting and healthy early child development.

- 2.19 All the in-house and externally commissioned services noted in this report will be subject to robust performance management and quality assurance. There will be a review of the effectiveness of the new early intervention and prevention strategy in due course.
- 2.20 It is essential that practitioners and managers in all Children's Trust partner agencies are informed of our new approach to early intervention and prevention. Several hundred workers have already attended briefing sessions to date which we have held to publicise key changes in children's services in Merton including those outlined in this paper. These briefings will be supported in the future by specific multi-agency training eg induction; understanding the child wellbeing model and new common and shared assessment procedures.
- 3 ALTERNATIVE OPTIONS**
- 3.1. None for the purposes of this report.
- 4 CONSULTATION UNDERTAKEN OR PROPOSED**
- 4.1. There has been significant consultation with partner agencies in the development of the new early intervention and prevention strategy.
- 5 TIMETABLE**
- 5.1. The changes outlined in this report are currently being implemented.
- 6 FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS**
- 6.1. All changes noted in this paper have been made within existing budget allocations.
- 7 LEGAL AND STATUTORY IMPLICATIONS**
- 7.1. No specific implications
- 8 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS**
- 8.1. An equalities impact assessment has been completed during the development of the new strategy and a number of services will be targeted to specific equalities groups.
- 9 CRIME AND DISORDER IMPLICATIONS**
- 9.1. Early intervention and prevention services generally, and the Transforming Families service specifically, are designed to minimise the number of young people exhibiting offending and anti-social behaviours.
- 10 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS**
- 10.1. No specific implications.
- 11 APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT**
- N/A
- 12 BACKGROUND PAPERS**
- 12.1. None