

## APPENDIX A

### **‘Call in’ of CAF-14-a “Proposals for the alteration and/or reduction of early help services provided to children and their families – getset”**

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Cabinet Member: Cllr Frances Nicholson, Cabinet Member for Children and Families Division and Local Member: Countywide

#### **1. Summary**

- 1.1. On 12 September 2018, Cabinet approved CAF-14a “Proposals for the alteration and / or reduction of early help services provided to children and their families – getset”. This decision followed its consideration and debate, along with CAF 14b, at Scrutiny Place committee on 11<sup>th</sup> September.

The Chair of the Scrutiny for Policies, Children and Families Committee has confirmed the grounds for a call-in on this Cabinet decision, outlined below:

*Following a conversation with other members who have expressed their concern around this item, I have spent some time reviewing the proposal and detail behind CAF-14a.*

*I feel that the data the decision is being based on is flawed, and as such does not follow the principles of good decision making, in fact if proven to be inaccurate, there is a chance that this could leave the decision maker open to legal challenge. Should the cuts go forward, then my concern is that this could have a massive detrimental impact on the family and young people the process is in place to support, and as such potentially create an increase in demand for children services at a higher level, as the level 2 interventions are our early help.*

*I have concern over the robustness of some of the facts that the proposed outcomes of the decision are based on, specifically the reduction in the number of referrals that are used to evidence the ability to increase individual caseloads and allow a considerable reduction in staff.*

*I have expressed my concern at both Place scrutiny and Cabinet, the responses I had, did not address my concerns.*

#### **2. Issues for consideration / Recommendations**

- 2.1. In response to the call-in request for savings proposal CAF 14a, that Scrutiny Committee Members consider and confirm that they are assured by the information provided by the Director of Children’s Services.

### 3. Background

#### 3.1. Early Help Development in Somerset

The following table shows a timeline of Somerset's early help journey over the last 4 years.

May 2014	Surestart and Children's Centre delivery is re-branded and re-scoped to become getset
March 2015	Ofsted inspection highlighted the need to "progress the early help strategy more swiftly, ensure that it is well embedded in practice across the partnership ... to reduce the number of inappropriate referrals and re-referrals to children's service; to strengthen early help arrangements and to ensure that thresholds for early help and social care services are clearly defined and widely understood so that children and their families benefit from the right help at the right time. Access to early help services is unclear and thresholds for accessing services are not widely understood across the partnership.
Summer 2015	Partnership events on early help leading to agreement of early help charter, development of new thresholds guidance and team around the school conception.
September 2015	<p>Following a deep dive analysis into getset, Essex County Council (appointed Somerset's improvement partners) recommend getset is re-aligned into 2 clear services:</p> <ul style="list-style-type: none"> <li>• Level 2 – Children with additional needs</li> <li>• Level 3 – Children with complex needs</li> </ul> <p>Frontline staff skills are matched to services across the 5 geographical district council areas.</p>
February 2016	<p><b>Effective Support for Children and Families in Somerset (thresholds guidance)</b> launched by Somerset Safeguarding Children Board</p> <p><b>Safeguarding Leads Consultation Line</b> – provides advice and guidance for safeguarding leads, GPs and Dentists prior to making a referral.</p> <p><b>Somerset Choices</b> – <a href="http://www.somersetchoices.org.uk">www.somersetchoices.org.uk</a> - is a web based platform providing information to the public and professionals about support services available including the local offers for early years and SEND.</p>
April 2016	Getset service areas are re-defined into 4 service areas to reduce management costs across West (Taunton, West Somerset and West Taunton Deane, Sedgemoor) and East (South Somerset and Mendip)
September 2016	<b>Launch of new Early Help Assessment (EHA)</b> including the multi-agency request for involvement form - All requests for support from getset (Level 2 and Level 3) received through a completed EHA, available online on professional choices.

	<p><b>Launch of Professional Choices</b> – <a href="http://www.professionalchoices.org.uk">www.professionalchoices.org.uk</a> - a platform for professionals providing early help information, and allowing secure virtual communication, encouraging direct contact between professionals to reduce the dependence on children’s social care.</p> <ul style="list-style-type: none"> <li>• <u>Early Help Assessment Information</u>: the home for all information and guidance regarding completion of the Early Help Assessment and other activities.</li> <li>• <u>Virtual Meeting Room</u>: A secure online area, which requires a login. This allows multi-agency professionals to share and collaborate on documents as well as plan and co-ordinate actions which will be particularly helpful when working as part of a ‘Team Around the Child’</li> <li>• <u>Who’s Who directory</u>: provides a list of local key worker contact details that can offer advice and support</li> </ul> <p><b>Early help Advice hub</b> established to triage all EHAs and provide advice and support on early help to practitioners.</p> <p><b>Early help Consultation Line</b> established to ensure consistency in threshold application when triaging the level 2 and level 3 Early Help Assessment (EHA) requests.</p> <p><b>Team Around the School (TAS)</b> launched to provide early help multi-agency network meeting hosted by secondary schools and their feeder primary schools aimed at level 2/3 Schools identify children they are concerned about to bring to the meeting; agencies that participate regularly include Schools, SomPar, Police, getset, Children’s Social care, CAMHS and Housing Providers. <a href="http://professionalchoices.org.uk/early-help/tas/">http://professionalchoices.org.uk/early-help/tas/</a></p>
April 2017	Early Help Module case management system (linked to children’s social care LCS system) went live in getset and in the Early Help Advice Hub
2017-2018	<p>Discussions and emerging proposals in line with Children and Young People’s plan to establish early help hubs in local communities offering multi-agency integrated services that identify and support children and families who need additional help and can intervene quickly.</p> <p>Public consultation in Autumn 2017 on the future provision of family support service and children’s centres</p>
Jan 2018	Ofsted published report from inspection in Nov 2017 identifies “Early help services in Somerset have improved yet are not fully established across the partnership. Early help, although improved, requires further integration with partners to increase its capacity.”

Feb 2018	<p>Cabinet approval to:</p> <ul style="list-style-type: none"> <li>• Implement phase 1 of the Family Support Service over 18/19 to develop a co-ordinated early help offer utilising technology and a wide network of local community venues such as family's homes, schools, health centres, village halls and children's centre buildings</li> <li>• Change the status of 16 of children's centres buildings</li> <li>• In principle support bringing Public Health Nursing service into SCC from April 2019, subject to agreed business case</li> </ul> <p>Phase 2 over 19/20 would be to integrate the public health nursing and getset staff teams. Further phases would look to align and integrate other services to establish the vision in the CYPP of early help hubs.</p>
Spring/Summer 2018	<p>Getset continues to be managed within SCC with ongoing improvement in practice and quality of service. Restructure implemented to reduce management and business support posts in readiness for integration with public health nursing from April 2019.</p> <p>Family Support Service workstreams in place to develop the proposals as per cabinet report.</p>

3.2. Both the Children's Act 2004 and Working Together to Safeguard Children 2018 (statutory guidance) set out early help arrangements.

*Effective early help relies upon local organisations and agencies working together to:*

- *Identify children and families who would benefit from early help*
- *Undertake an assessment of the need for early help*
- *Provide targeted early help services to address the assessed needs of a child and their family which focuses on activity to improve the outcomes for the child*

Local authorities, under section 10 of the Children Act 2005, have a responsibility to promote inter-agency co-operation to improve the welfare of all children.

The following table explains the 4 levels of need as set out in the 'Effective Support for Children and Families in Somerset' guidance.

Level 1 Universal	<p>Anyone can access universal services. These are services such as GPs, school, hospital, health visitors, midwives.</p> <p>The majority of young people and families require support from universal services alone and have no additional needs.</p>
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Level 2 Additional	Children, young people and their families who require some extra support to help them reach their potential.  This may be short term, and likely to require a single agency input. It may require further agency input and a targeted service to support them.
Level 3 Complex	Children, young people and their families who require significant, personalised support, often from several agencies working together to help them reach their potential. These children will continue to need the support of Universal services.
Level 4 Acute	These children are suffering or are likely to suffer significant harm. This is where child protection procedures may need to be put in place and a social worker gets involved. These are families in crisis and require statutory services to become involved. This level can also include health services which include day patient or outpatient settings for children and adolescents with severe and/or complex health problems.

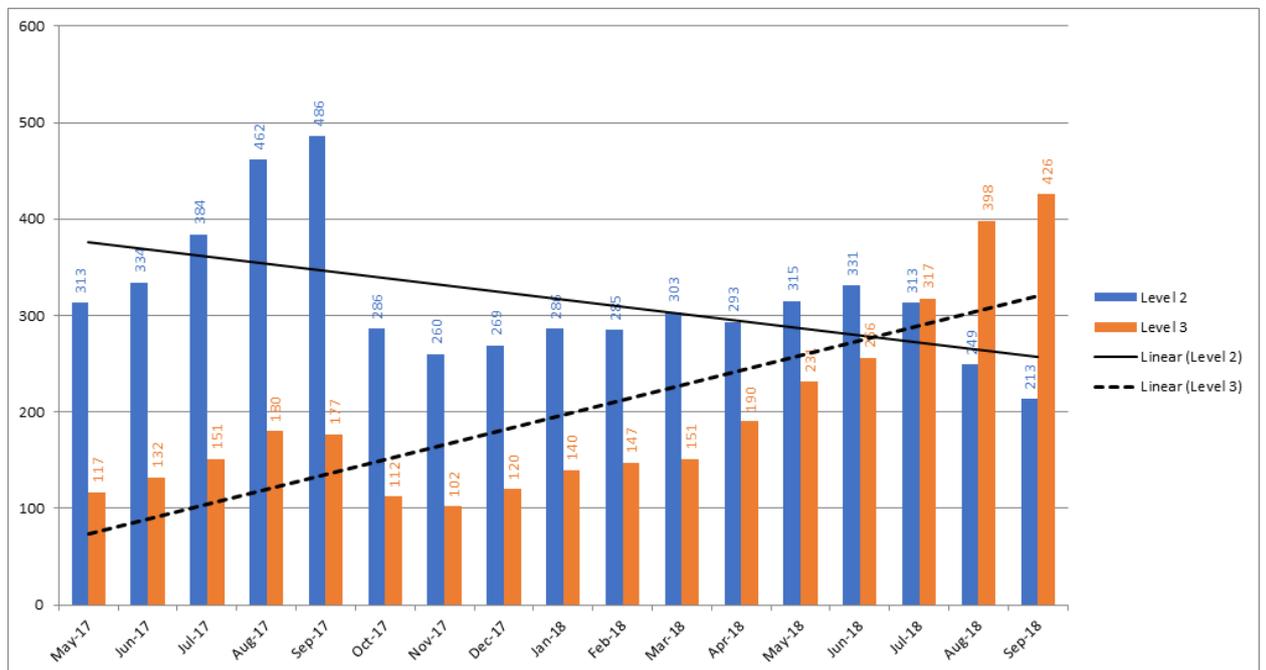
### 3.3. Data and Referrals

All the data in the proposals presented to Scrutiny and Cabinet in September and in this report is drawn from the early help case management system which was implemented in April 2017. There were some initial teething problems with the implementation, and through increased training, better practice and management oversight the data now reported is considered accurate.

Prior to April 2017 the getset service operated on a manual paper based records system with a tracker spreadsheet.

Caseload information is calculated manually by using the numbers of open cases (families) from the case management system and the Full Time Equivalent (FTE) staff numbers in post; this provides an accurate picture for managers to understand how both full and part time staff, and those providing group activities are meeting the caseload expectations that the getset service has set.

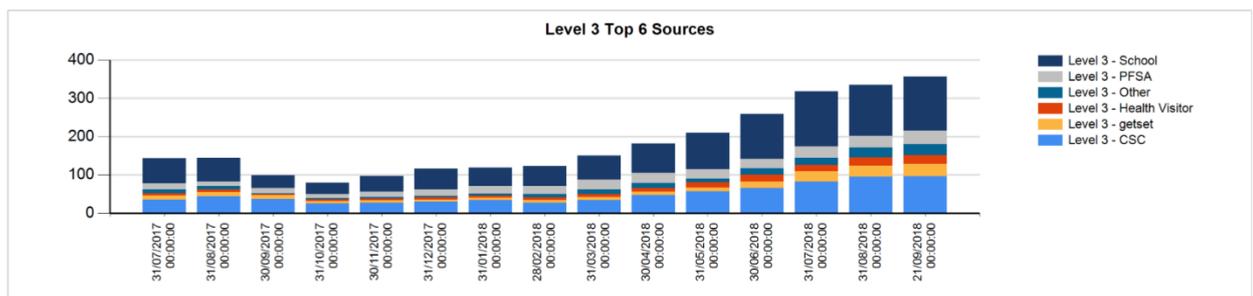
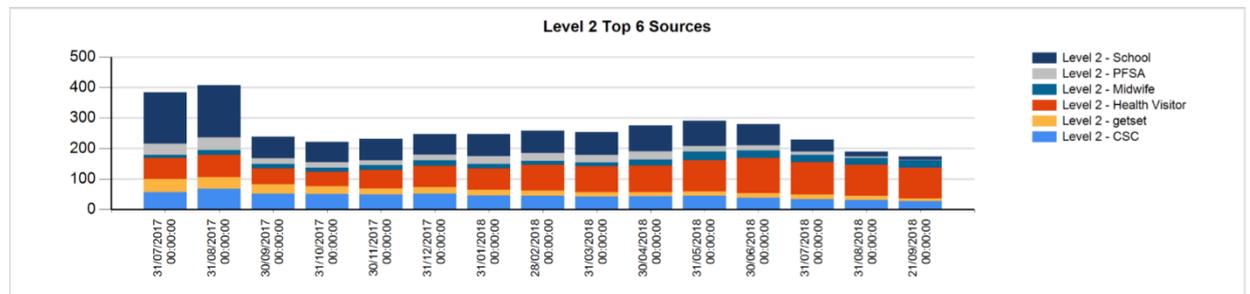
The graph below shows the number of families open to level 2 and 3 getset service since May 2017.



The referrals into the getset service come via completed EHAs undertaken by practitioners where a need has been identified for a child or family. In the early years of Surestart, the aim was universal participation rather than identifying and addressing need. Numbers recorded then, of course, reflect this. Nationally the focus has in recent years moved to the identification and support of families with additional needs. Families, particularly those with young children, in the course of their daily lives, have contact with many providers of universal services, for example midwives, health visitors, GPs and early years' providers among others, any one of whom can initiate an assessment of need and support to meet that need. For the last three years if anyone has telephoned a Children's Centre, visited 'on-spec' to a children's centre or getset led outreach provision, and is asking for additional support a family support worker will visit them at home to initiate the same assessment of need, if other professionals have not already identified this need in the course of their contact with the family.

The graphs below show the top 6 agencies who have submitted Level 2 and Level 3 EHAs from July 2017 to September 2018. For Level 2 it should be noted that where referrals are received from school/PFSAs they are working

with a school age child who has a younger sibling aged 0-4 who requires a service from getset.



### 3.4. The Early Help Assessment (EHA)

*Has the implementation of the new EHA form impacted referrals?*

As shown in the timeline table above (3.1) the EHA was launched in September 2016; no new form has been implemented since. It is reviewed regularly with partners and minor changes made.

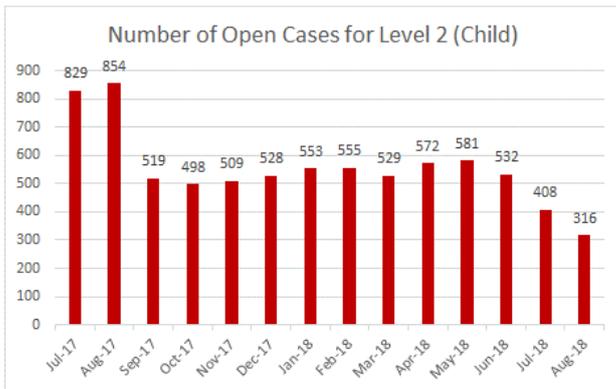
*Does the new form complement the health visitor recording process or is it an additional form?*

Health Visitors complete a 'family health needs assessment' (FHNA) form and are advised to complete the EHA and attach the FHNA to the EHA if there is a need to refer a child/family for getset support (to indicate parental consent).

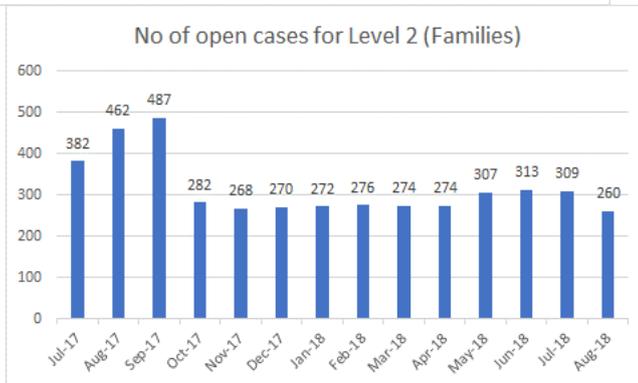
### 3.5.

#### Level 2 Service

Level 2 getset service provides support mainly for 0-4-year olds. Alongside this are health visitors supporting 0-4 year olds and PFSA's provide level 2 support for 5-16 years (those children in school). The success of the troubled families programme may also be having a positive long term effect on families.



The following graphs shows the Level 2 open cases, by child and by families over the past year.



The case management system was implemented in April 2017. The drop from August to September 2017 indicates a period of improved practice by removing casework drift across the service and consistency of recording by staff.

As the timeline in 3.1 shows the service is not in any current operational transition as it continues to offer the same service, and access to that service, as it has done since 2016. There has been no fundamental change in the Early Help Advice Hub or with the Early Help Assessment since they were implemented in 2016, apart from minor changes to internal processes, recording and practice improvements. The EHA also includes the ability to refer to getset, and this has not changed since 2016.

Caseloads and activities of a level 2 worker – A full time Level 2 Family Support Worker (FSW) is expected to hold a case load of 14 (families). If they are responsible for running groups case load is reduced proportionately.

A full time Level 2 FSW approximately delivers 1-2 groups per week. Time allocation for a group is a maximum of 3.5 hours which is 8% of their working time. getset run:

- Parenting programmes ie Baby PEEP, Triple P
- Bumps and Babes
- Messy play
- Stay, play and learn
- Young Parents Group (with Health Visitors)

Health Visitors run health led groups such as breastfeeding support, young parents' groups (ante and post natal) and Healthy Child Clinics and this remains unchanged going forward. In addition many health visitor and assistant health practitioner colleagues are trained in evidenced based parenting programmes and offer this service in some areas.

The average caseload for Level 2 in August 2018 was calculated to be 1:6. Current case load expectations of 1:14 families is based on national research, as there is no expectation set by Ofsted. The proposals are to reduce the family support worker FTE numbers to not less than a safe minimum service. The Director of Children’s Services takes the view that a minimum safe service can be provided by resetting caseload levels of up to a maximum of 1:20 families. Group activities and parenting programmes should still continue as part of a workers caseload as these are minimal and often parenting programmes are run on an ad-hoc / demand led basis.

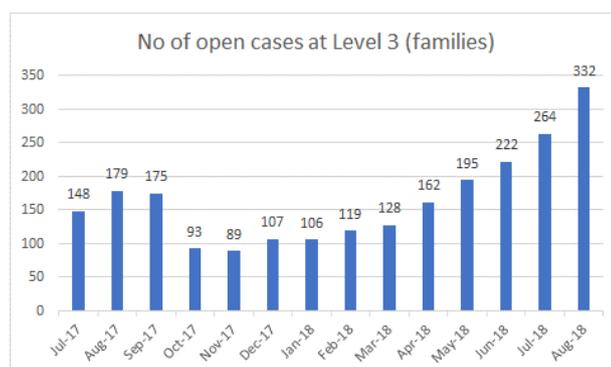
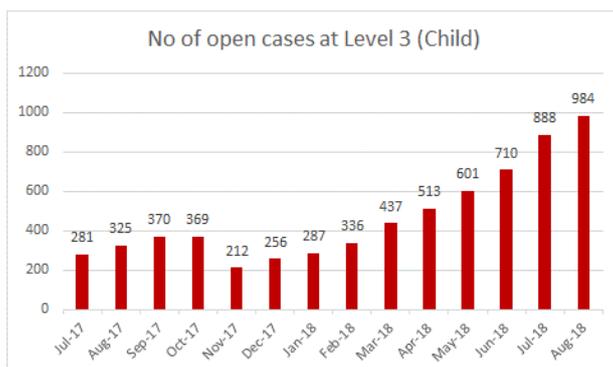
### 3.6. Level 3 Service

From the data above the referrals into the level 3 service have increased, both through EHAs (and referrals into the service) and the step-downs from children’s social care resulting in a reduction in the number of children in need and child protection cases.

Caseloads and activities of a Level 3 Worker – a full time Level 3 Family Intervention Worker (FIW) is expected to hold a case load of 10-12 families. If they are responsible for running groups case load is reduced proportionately.

A full time Level 3 FIW approximately delivers 1-2 groups per week. Time allocation for a group is a maximum of 3.5 hours which is 8% of their working time. Getset run:

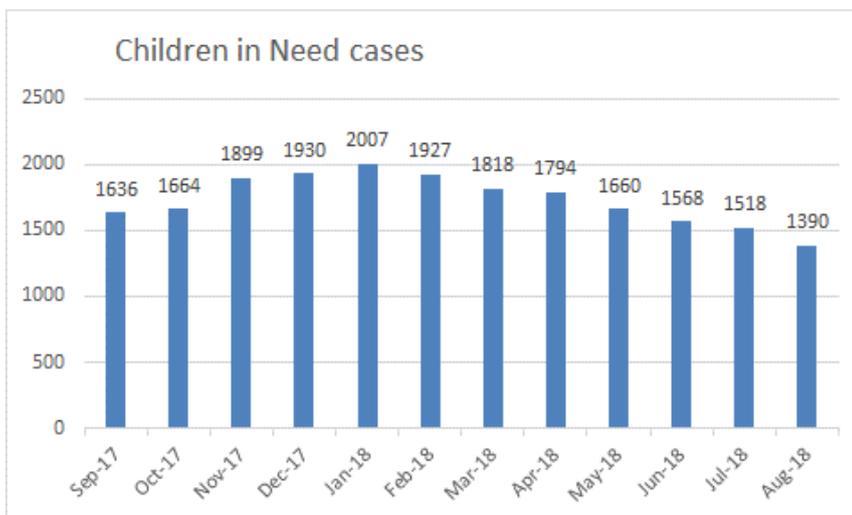
- Parenting programmes ie Tuning into teens / kids; My change programme



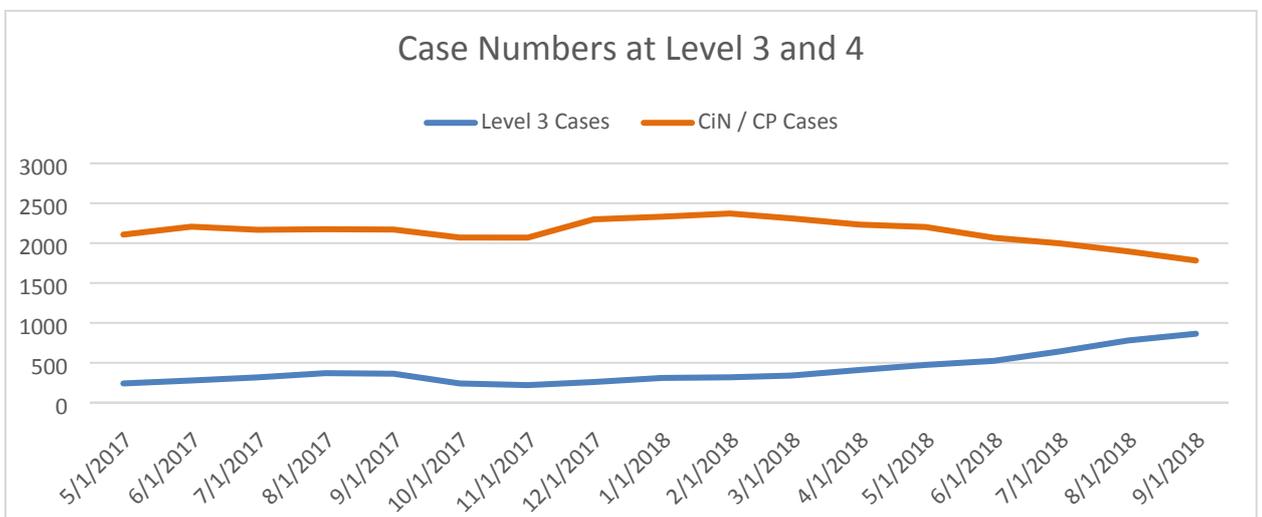
The graph below shows the caseloads by child and by families over a 12 month period (July 2017 to August 2018).

The average caseload held in Level 3 across Somerset in the last 12 months has been 1:8. Current case load expectations of 1:10 - 12 families is based on national research, as there is no expectation set by Ofsted. The proposals are to reduce the family intervention worker FTE numbers to not less than a safe minimum service. The Director of Children’s Services takes the view that a minimum safe service can be provided by resetting caseload levels of up to a maximum of 1:15 families. Parenting programmes should still continue as part of a workers caseload as these are minimal and often parenting programmes are run on an ad-hoc / demand led basis.

The graph below shows the number of level 4 (Children in need) cases reducing which have been stepped down to level 3 getset.



The graph and table below shows the increase in Level 3 getset cases and the decrease in Level 4 Children in need (CiN) /child protection (CP) cases.



	01/05/2017	01/06/2017	01/07/2017	01/08/2017	01/09/2017	01/10/2017	01/11/2017	01/12/2017	01/01/2018	01/02/2018	01/03/2018	01/04/2018	01/05/2018	01/06/2018	01/07/2018	01/08/2018	01/09/2018
Level 3 Cases	241	278	317	370	363	241	220	259	310	318	340	410	473	524	642	779	864
CiN / CP Cases	2107	2206	2167	2174	2170	2070	2069	2298	2331	2371	2310	2232	2202	2067	1997	1897	1782

#### 4. Consultations undertaken

4. HR consultation process with unions and staff started in August 2018, prior to the proposals being published. A consultation paper will be shared with staff for them to comment on the proposed new structure and changes to caseloads held.

#### 4. CAF – 14b (for information)

For the benefit of the Committee, at the same time as CAF – 14a was agreed by the Cabinet decision on 12 September 2018, it also agreed to undertake consultation regarding another savings proposal in respect of CAF – 14b (getset services) involving service users and other stakeholders, to consider the complete cessation of getset level 2 service in the context of a system wide early help offer.

The proposed high level timeline for this consultation is detailed below:

ACTIVITY	START	END
Project Start	17/09/2018	
Needs assessment scoping meeting	18/09/2018	18/09/2018
Create stakeholder list	18/09/2018	28/09/2018
Prepare consultation paper and questions	18/09/2018	03/10/2018
Prepare needs assessment/supporting data	18/09/2018	03/10/2018
Sign off consultation at DMT	04/10/2018	04/10/2018
Share consultation at Children's SMT	04/10/2018	04/10/2018
Share draft with Scrutiny	08/10/2018	08/10/2018
Final amendments to consultation	08/10/2018	12/10/2018
Launch consultation (inc 1 week half term)	15/10/2018	03/12/2018
Analyse responses (as they are received)	03/12/2018	17/12/2018
Write paper for cabinet and circulate	17/12/2018	02/01/2019
Scrutiny for Policies, C&F- Pre-meet Report Deadline	07/01/2019	07/01/2019
Scrutiny for Policies, C&F - Pre-meet	10/01/2019	10/01/2019
Deadline for Forward Plan	14/01/2019	14/01/2019
Deadline for Final Reports - Scrutiny	16/01/2019	16/01/2019
Cabinet pre-meet reports deadline	23/01/2019	23/01/2019
Cabinet Meeting - Pre-meet	23/01/2019	23/01/2019
Deadline for Final Reports - Cabinet	30/01/2019	30/01/2019
Scrutiny for Policies, Children & Families Meeting	25/01/2019	25/01/2019
Cabinet Meeting	11/02/2019	11/02/2019

CAF-14b (pages 518-532) in the cabinet papers, shows the equalities impact assessment for the "Proposals for the alteration and/or reduction of early help services provided to children and families" which is to undertake a public consultation on the Council no longer providing Level 2 services, and how best the Council, as the lead agency, ensures effective early help across the partnership in the future.

Pages 533-537 of the cabinet report sets out the proposal for change for CAF-14b.

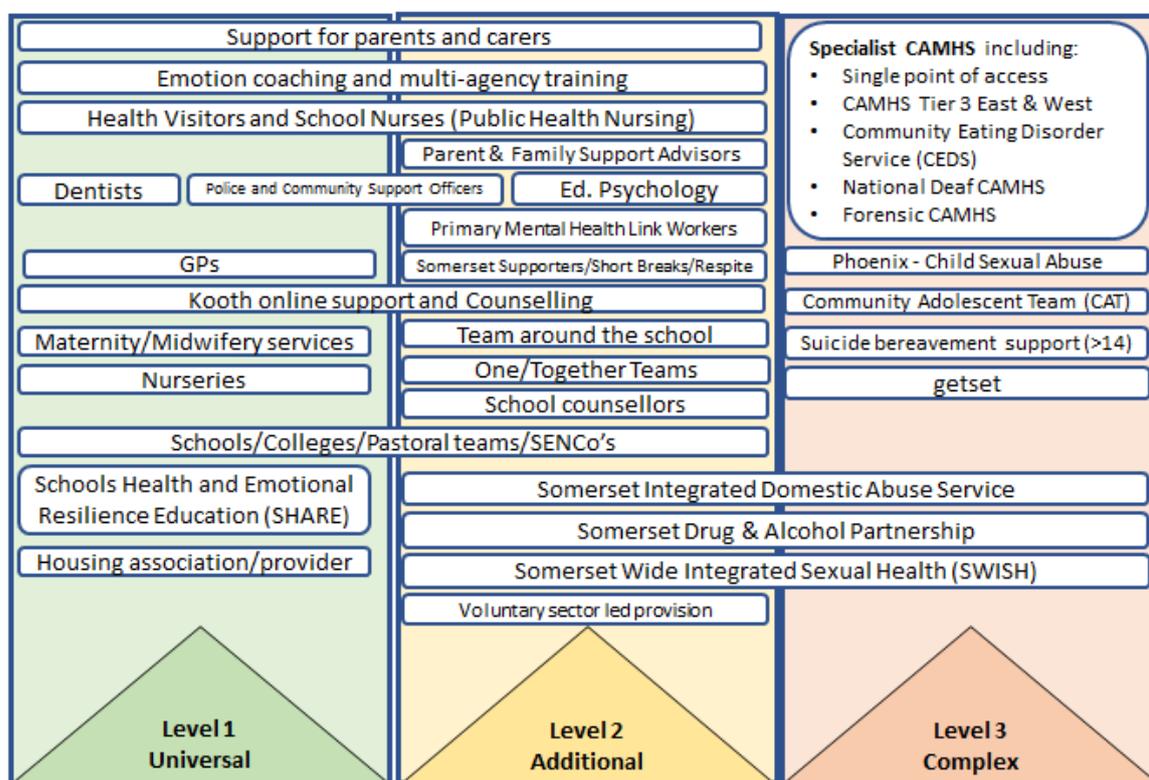
## 5. Implications

5. In respect of CAF-14a, it is considered that there will be minimal impact on children and families in that positive outcomes will still be achieved through the wider support of statutory agencies in Somerset.

As shown above the data used to inform the proposals, carefully analyses the current referrals and caseload averages, which shows there is capacity in the service which is no longer required.

Ofsted in 2018, and Essex County Council as our improvement partners, and early findings from an external review of children’s services all indicate that partners should be doing more to address the needs of children at level 2 rather than SCC providing level 2 services. Our analysis and partnership work suggests that other partners are starting to pick up on this challenge.

The table below shows a range of services, interventions and approaches available already in Somerset; please note this is not exhaustive



## 6. Background papers

- 6.1. CAF-14a “Proposals for the alteration and/or reduction of early help services provided to children and their families – getset” – Part of the cabinet papers on 12<sup>th</sup> September 2018 (pages 130 – 134).

CAF-14b - part of the papers considered at Cabinet on 12 September 2018

**Note:** For sight of individual background papers please contact the report author.