

Review of Cabinet Decision – CAF14a “Proposals for the alteration and/or reduction of early help services provided to children and their families – getset”

Scrutiny Committee Chairman: Cllr Leigh Redman
Member initiating the Call-in: Cllr Leigh Redman
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1. Summary

The following submission was received from a member of the Scrutiny Committee for Children & Families regarding the Cabinet decision on 12 September 2018 relating to savings proposal CAF 14a. The call-in request was considered and accepted by the Chair of the Committee in accordance with the Constitution and following consultation with the Monitoring Officer, Scrutiny Officer and Director of Childrens Services:

1.1 Why?

“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.

1.2 What information is required to help the Scrutiny Committee consider the call-in:

The proposal report states:-

Page 130-131. Current Demand Level. Over the last 12 months the number of referrals to the level 2 service has steadily declined; from 829 children in July 2017 to 316 children in August 2018. The referrals to the level 3 service during this period have increased from 372 children to 888 in Aug 2018.

This statement needs to be read in two halves. Considering the service has been in a state of massive transition during the period this data was collected, I have argued that using the data while the service is in transition is wrong, the gateway into referrals has changed with the introduction of the online EHA form, stakeholders and families do not fully understand the new referral process, staff are still developing the offer, during this period centres are closing or have closed, the whole of our Getset service is confused, so of course referrals will have reduced.

We would need to see a month by month analysis?

We need to understand & question why has the number of referrals gone down in that period?

Has the implementation of the new EHA form impacted referrals?

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

We need to understand the detail around workloads, what proportion of these staff members time is spent on level 2 referrals, what other duties (statutory or other) do the staff do and who will do this once they have gone?

What will the impact be to young people and families?

To reduce staff solely on referral data is wrong, as this is only one function of the work level 2 staff do, other areas I understand include:- Stay and play in areas of deprivation, Healthy child clinics with Health visitors, Breastfeeding groups, Bumps to Babe, Monitoring child meetings, PEEP, Triple P, young parent targeted support and much more.

Level 2 staff do much more than referrals.

The proposal continues:- It is worth noting that whilst there has been an increase in Level 3 there has been a corresponding decrease in Level 4 cases open to Children's Social Care, where many cases have stepped down to Getset from social care intervention. This statement is the reason I say that the above statement needs to read in two halves, it is confusing and does not give a fair picture, and I feel should be read as a warning, an increase in level 3 does not validate the reduction in level 2, if level 2to3 referrals have reduced with no evidence presented as to why, then there could be more young people and families being missed.

Page 131. In February 2018, cabinet approved that the Getset service should integrate with public health nursing teams in April 2019, to form the Family Support Service, and remodel the existing children's centre building estate. This statement should be a warning, as it shows reference data being collected in the latter 6 months of the period.

The paper then argues that:- Page 131. Proposed Change. In view of current demand and by increasing caseload targets across the service, it is proposed to reduce staffing levels accordingly, to within a safe minimum level. Basing this statement on the flawed data (Current demand) is wrong and should be reviewed.

It then states a '90% confidence level', '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' and 'no impact is expected to other services'. How can there be a high confidence in achieving this when the data is flawed, statutory agencies

(just one area of stakeholders) are still confused and the service is being developed, with no impact assessments or consultation with staff or users how can this statement be justified?

Page 133. Point 10, initial equality impact assessment states:- 'The assessment is that there is a minimal impact on children and families. This is because the analysis of current referrals and caseload per worker indicates the current service can be reduced to within safe minimum levels. The proposal to reduce staffing numbers therefore brings staffing levels down to meet current demand.' No impact statements included in report.

With flawed and inaccurate data, recorded during a period of massive transition, with no user or staff input and no form of impact assessment, I feel it necessary to formally 'Call in' this element (CAF-14a) of the decision to allow a full review of this proposal.

1.3 Whether the implementation of the decision should be delayed until the scrutiny process is complete?

Yes – although planned consultation with staff regarding the proposals can proceed so long as no decisions are taken and implemented.

1.4 The preferred outcome

For the Director of Childrens Services to provide the information requested as part of the call-in request, in order to provide assurance to the Committee regarding the savings proposal and that the impacts to service users are as stated.

If necessary, the Committee may agree by a majority vote to make recommendations to the Cabinet. Any recommendations would need to be proposed and seconded by members of the Committee.

2. Background

2.1. Scrutiny Review process

Appendix A to this report sets out the response from the Director of Childrens Services, along with details of savings proposal CAF 14a that was considered at the Scrutiny Place meeting on 11 September 2018 and agreed at the Cabinet meeting on 12 September 2018.

The Scrutiny Committee cannot change or overturn the Cabinet decision itself, but can request that the decision be re-considered in the light of their review.

Members of the Committee will consider the matters raised in the call-in request and either :

- i) Accept the assurance and additional supporting information provided by the Director of Childrens Services regarding savings proposal CAF 14a; or
- ii) make specific recommendations to the Cabinet requesting they review the decision taken regarding CAF 14a.