

# Scrutiny for Policies, Children and Families Committee

Friday 25 January 2019  
9.30 am Library Meeting Room, Taunton Library



To: The Members of the Scrutiny for Policies, Children and Families Committee

Cllr L Redman (Chair), Cllr R Williams (Vice-Chair), Cllr M Dimery, Cllr N Hewitt-Cooper, Cllr James Hunt, Cllr J Lock, Cllr W Wallace, Cllr J Williams.  
Mr P Elliott, Ms Helen Fenn, Mrs Ruth Hobbs and Mrs Eilleen Tipper

All Somerset County Council Members are invited to attend meetings of the Cabinet and Scrutiny Committees.

Issued By Scott Wooldridge, Strategic Manager - Governance and Risk - 17 January 2019

For further information about the meeting, please contact Neil Milne on 01823 359045 or [ndmilne@somerset.gov.uk](mailto:ndmilne@somerset.gov.uk)

Guidance about procedures at the meeting follows the printed agenda.

This meeting will be open to the public and press, subject to the passing of any resolution under Section 100A (4) of the Local Government Act 1972.

This agenda and the attached reports and background papers are available on request prior to the meeting in large print, Braille, audio tape & disc and can be translated into different languages. They can also be accessed via the council's website on [www.somerset.gov.uk/agendasandpapers](http://www.somerset.gov.uk/agendasandpapers)



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# AGENDA

Item Scrutiny for Policies, Children and Families Committee - 9.30 am Friday 25 January 2019

**\*\* Public Guidance notes contained in agenda annexe \*\***

**1 Apologies for Absence**

The Chair of the Committee will ask for Members' apologies.

**2 Declarations of Interest**

Details of all Members' interests in District, Town and Parish Councils will be displayed in the meeting room. The Statutory Register of Member's Interests can be inspected via the Community Governance team.  
The Chair of the Committee will ask for any other declarations.

**3 Minutes from the previous meeting held on (Pages 7 - 24)**

The Chair of the Committee will ask for confirmation that the attached minutes are an accurate record of the last meeting.

**4 Public Question Time**

The Chair of the Committee will allow members of the public, who have registered, to ask a question/s and/or make a statement/s about any matter on the agenda for this meeting. Each member of the public that has registered to speak is allocated 3 minutes.  
**At the Chair's discretion, questions and statements from the public may be taken during the meeting, when the relevant agenda item is considered.**

**5 Scrutiny Work Programme (Pages 25 - 38)**

To discuss any items for the forthcoming work programme. To assist the discussion, the following documents are attached:  
a) – The Cabinet's latest published forward plan;  
b) – Current Work Programme for the Committee.

At the last meeting the Committee requested that the Outcome Tracker be refreshed and updated. An updated version of the Tracker will be presented to the 22 March 2019 meeting.

**6 MTFP Plan for Children's Services - Peopletoo Recommendations update (Pages 39 - 44)**

To consider this report.

**7 Medium Term Financial Plan (2019-2022) for Children's Services (Pages 45 - 86)**

To consider this report.

**8 Annual Somerset Safeguarding Children Board report (Pages 87 - 170)**

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To consider this report and receive a presentation.

9 **Children and Young People's Plan 2019-2022 Update** (Pages 171 - 180)

To consider this report and presentation.

10 **Update on CAF-14b Proposals for the alteration and / or reduction of early help services provided to children and their families - 'getset'** (Pages 181 - 240)

To consider this report.

11 **Any other urgent items of business**

The Chair of the Committee may raise any items of urgent business.

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## Guidance notes for the meeting

### 1. Inspection of Papers

Any person wishing to inspect Minutes, reports, or the background papers for any item on the Agenda should contact the Committee Administrator for the meeting – Neil Milne on 01823 359045 or email: [ndmilne@somerset.gov.uk](mailto:ndmilne@somerset.gov.uk)  
They can also be accessed via the council's website on [www.somerset.gov.uk/agendasandpapers](http://www.somerset.gov.uk/agendasandpapers)

### 2. Members' Code of Conduct requirements

When considering the declaration of interests and their actions as a councillor, Members are reminded of the requirements of the Members' Code of Conduct and the underpinning Principles of Public Life: Honesty; Integrity; Selflessness; Objectivity; Accountability; Openness; Leadership. The Code of Conduct can be viewed at: <http://www.somerset.gov.uk/organisation/key-documents/the-councils-constitution/>

### 3. Minutes of the Meeting

Details of the issues discussed and recommendations made at the meeting will be set out in the Minutes, which the Committee will be asked to approve as a correct record at its next meeting.

### 4. Public Question Time

**If you wish to speak, please tell the Committee's Administrator by 5.00pm of the 3<sup>rd</sup> (working) day before the meeting.**

At the Chairman's invitation you may ask questions and/or make statements or comments about any matter on the Committee's agenda – providing you have given the required notice. You may also present a petition on any matter within the Committee's remit. The length of public question time will be no more than 30 minutes in total.

A slot for Public Question Time is set aside near the beginning of the meeting, after the minutes of the previous meeting have been signed. However, questions or statements about any matter on the Agenda for this meeting may be taken at the time when each matter is considered.

You must direct your questions and comments through the Chairman. You may not take a direct part in the debate. The Chairman will decide when public participation is to finish.

If there are many people present at the meeting for one particular item, the Chairman may adjourn the meeting to allow views to be expressed more freely. If an item on the Agenda is contentious, with a large number of people attending the meeting, a representative should be nominated to present the views of a group.

An issue will not be deferred just because you cannot be present for the meeting. Remember that the amount of time you speak will be restricted, normally to three minutes only.

5. **Exclusion of Press & Public**

If when considering an item on the Agenda, the Committee may consider it appropriate to pass a resolution under Section 100A (4) Schedule 12A of the Local Government Act 1972 that the press and public be excluded from the meeting on the basis that if they were present during the business to be transacted there would be a likelihood of disclosure of exempt information, as defined under the terms of the Act.

6. **Committee Rooms & Council Chamber and hearing aid users**

To assist hearing aid users the following Committee meeting rooms have infra-red audio transmission systems (Luttrell room, Wyndham room, Hobhouse room). To use this facility we need to provide a small personal receiver that will work with a hearing aid set to the T position. Please request a personal receiver from the Committee's Administrator and return it at the end of the meeting.

7. **Recording of meetings**

The Council supports the principles of openness and transparency. It allows filming, recording and taking photographs at its meetings that are open to the public - providing this is done in a non-disruptive manner. Members of the public may use Facebook and Twitter or other forms of social media to report on proceedings and a designated area will be provided for anyone wishing to film part or all of the proceedings. No filming or recording may take place when the press and public are excluded for that part of the meeting. As a matter of courtesy to the public, anyone wishing to film or record proceedings is asked to provide reasonable notice to the Committee Administrator so that the relevant Chairman can inform those present at the start of the meeting.

We would ask that, as far as possible, members of the public aren't filmed unless they are playing an active role such as speaking within a meeting and there may be occasions when speaking members of the public request not to be filmed.

The Council will be undertaking audio recording of some of its meetings in County Hall as part of its investigation into a business case for the recording and potential webcasting of meetings in the future.

A copy of the Council's Recording of Meetings Protocol should be on display at the meeting for inspection, alternatively contact the Committee Administrator for the meeting in advance.

## **SCRUTINY FOR POLICIES, CHILDREN AND FAMILIES COMMITTEE**

Minutes of a Meeting of the Scrutiny for Policies, Children and Families Committee held in the Library Meeting Room, Taunton Library, on Friday 7 December 2018 at 10.00 am

**Present:** Cllr L Redman (Chair), Cllr R Williams (Vice-Chair), Cllr N Hewitt-Cooper, Cllr W Wallace, Cllr M Keating, Cllr L Leyshon and Cllr T Munt. Mrs Eileen Tipper.

**Other Members present:** Cllr M Chilcott, Cllr C Lawrence, Cllr F Nicholson.

**Apologies for absence:** Cllr M Dimery, Cllr James Hunt, Cllr J Lock, Cllr J Williams, Mr P Elliott, Ms Helen Fenn and Mrs Ruth Hobbs.

### **24    Declarations of Interest - Agenda Item 2**

There were no declarations made.

### **25    Minutes from the previous meeting - Agenda Item 3**

The minutes of the last meeting were agreed.

### **26    Public Question Time - Agenda Item 4**

Questions were received for agenda items and these were heard at the time the Committee considered that agenda item. Where the questioner was not able to ask the question in person the question/s were read aloud by the Council's Monitoring Officer.

### **Item 6 – Hospital Admission for Self-harm in Somerset**

#### **Somerset Parent Carer Forum ask:**

In your report you highlight that there is a view that “you have to attempt suicide to get treatment”. At the forum we are sad to confirm this is the view held by many families due to their own experience or what they hear from other families. We are regularly told by families that they have been referred to CAMHS but that the referral has been unsuccessful, and they have been given no other advice other than you don't meet the threshold. What plan do you have to address this?

#### **Response:**

Self harm is clearly a sign of emotional distress, but not necessarily mental illness, the DPH annual report focuses on the high number of children presenting at A&E with self harm and then being admitted. However, we believe that the solution is in intervening earlier and teaching children about positive coping skills (many of which are already being used by children which we know from the HWB survey) and also ensuring support is available beyond the borders of specialist services. The comments about accessibility made in the report were also followed by a recognition that many people refer to CAMHS because they are not aware of other services that might in fact meet the needs of the child more appropriately.

The problem in our view is not with CAMHS but with the system as a whole. This report wanted to highlight the fact that mental health needs to be everybody's business and we need support of the Forum to help us find ways to meet these needs. On a practical note one thing we have done since the report is to bring together service providers of early intervention mental health services for children and young people. Forty organisations came together and there are now plans to produce details of those services in an easily accessible place for parents and to look at ways they can work better together.

**Somerset Parent Carer Forum ask:**

Another area of concern is the families that have children who are self-harming, are being told that because the child is autistic they do not have mental health needs and children are being discharged from CAMHS because they are awaiting an ADOS. Does the data collected allow Somerset to have a clear understanding of the links between self-harming, Autism and mental health needs so as to commission the needed support for this group?

**Response:**

No I am afraid the data is only collected at a high level and so there is no other medical information attached to this data. I think we should feed this information into the CAMHS commissioning group, which my colleague from the CCG James Slater leads. Issues of diagnoses and on-going mental health problems related to self-harming behaviour were not in scope for any condition. The on-going multiagency (CCG and SCC PH and educational psychology) work around self-harm prevention will be inclusive but any information the Forum has to illustrate how self-harming behaviour is different in relation to children and young people with autism would be welcome.

**Somerset Parent Carer Forum ask:**

Pages 23-25 highlights the use of schools to support children and young people's mental health needs. The forum has recently completed a project for NHS England collecting case studies of families who have experienced tier 4 CAMHS services. One of the things that came from that is that schools were unable to implement the recommendations from CAMHS constantly due to capacity. This led to an escalation which resulted in admissions. How realistic is it that all schools will be able to implement the framework and how are you going to avoid a postcode lottery resulting in some schools not doing so?

**Response:**

Excellent questions, which I think is in 2 parts, there is a tiny proportion of Somerset children who require support at the highest level of specialist support (less than 100) this service is commissioned by NHS E and again I suggest we feed back this information through the CAMSH commissioning group to NHE E, as we know from children living with a whole range of conditions from asthma, diabetes and cerebral palsy, a school care plan that is deliverable is so important to enabling them to be at school, make friends and learn – as every other child has the right to do, a recommendation of the suicide review of CYP was that children in receipt of CAMHS had a school care plan – to enable the school to manage risk in an informed way



The Somerset Wellbeing Framework is about a whole school approach to mental health and was developed in consultation with schools, young people and CYP practitioners over an 18 month period. It aspires to change the culture of schools and embed an ethos where mental health is regarded as everyone's business. Inevitably a culture change of this kind will take time to happen but already we can see that this work resonates with schools, the framework was launched in June 2018 and already 41 schools are actively working through the Wellbeing Audit tool with many more registered on the website and using the information and resources to support staff development.

We are conscious that capacity is and will remain an issue with schools being able to manage what they do to educate children and young people alongside actively promoting wellbeing. We have therefore designed the framework to include Pillars of Wellbeing that underpin good mental health with themes that schools recognise as being part of their everyday provision; building a sense of belonging, positive relationships and healthy lifestyles. These areas are fundamental to wellbeing and education so fit well with what schools already offer.

Alongside this, schools are being supported by the Schools Health and Resilience Education Team (SHARE) who providing dedicated Mental Health support at a universal level across all 39 secondary and middle schools over a three year period. The team are working to the framework delivering wellbeing-based activities for staff, parents and young people. Alongside this, the school nurse team are taking an active role in supporting emotional health and wellbeing through the delivery of school-based clinics and as active members of school Wellbeing Action Groups.

To further support schools to adopt a whole school approach to wellbeing and mental health, SCC Public Health is providing a range of training opportunities accessible to all schools. These include a programme of PSHE CPD delivered by an organisation called LIFEbeat and bitesize specialist mental health sessions around topics such as self-harm, eating disorders and bereavement and loss. There is also further Mental Health First Aid on offer and plans to cascade training to parents through a combination of parent workshops and webinars.

The expectation is not to create CAMHS provision in schools but to develop an environment where staff and pupils understand and are able to promote positive mental health and can provide support and early intervention activities at school level. Further government investment (Green Paper) is expected within the next 2 years that will enable greater capacity and leadership in mental health. The Somerset Wellbeing Framework is laying down the foundations for this.

### **Item 7 - 2015-2020 Somerset Local Transformation Plan for Children and Young People Emotional Health & Wellbeing**

#### **Somerset Parent Carer Forum ask**

Point 15 in the report highlights the development of the overarching & integrated Health & Social Care Strategy for Somerset (Fit for My Future). From attending the events around the county, we can see that Mental health needs

are being looked at separate to the children and maternity work stream. How are you going to ensure that the mental health needs of children and young people do not get lost/loss priority within this approach?

Point 19 - You highlight the extensive local consultation and engagement in the past. Please can you clarify when this took place, how many people were involved and the type of responders e.g. organisations, children, parent etc?

**Response:**

We are working very closely with colleagues to ensure that that the mental health needs of children and young people do not get lost or loss priority. It is acknowledged that the LTP is a plan which (in its initial iteration) pre-dated the Somerset CYPP 2016-2019; and also that effective partnership working requires joint planning & commissioning. Therefore, Somerset CCG has committed to conducting this review in partnership using existing partnership arrangements. Somerset CCG is an active member of the Somerset Children's Trust (SCT) & in 2018 the SCT Chair is the CCG Director of Quality & Safety (also SCCG Lead Director for Children). SCT's work programme - set out in the Somerset Children and Young People's Plan (CYPP) - includes a programme for Improving Emotional Health & Wellbeing (EHWB). This programme board will oversee & deliver the review and ensure it is embedded into the next iteration of the CYPP. Also, as a continuation of strategic planning and development of health & social care in Somerset begun by the Sustainability & Transformation Plan, work has commenced on an integrated Health & Care (H&C) Strategy, called "Fit for My Future". This work will encompass CYP MH/LD albeit through two overlapping workstreams, each with a service development collaborative: children & maternity; and mental health & learning disabilities. Therefore, a key challenge for the review work will be to ensure that the LTP's achievements, aspirations and legacies are incorporated into future plans for services in Somerset by the FFMF strategy and its governing structures.

Regarding local consultation and engagement the LTP has benefited from extensive local consultation & engagement through its lifespan, and this is acknowledged by NHS England. As such, the refresh builds on sound foundations. The Children's Trust has recently conducted an extensive programme of engagement in preparation for the next iteration of the Somerset CYPP. The refresh & review will both be informed by the findings of that work. Similarly, the Fit for My Future programme has conducted an extensive programme of engagement, by which the review will be informed. The Programme Board includes a range of partner representatives, including a member of the Scrutiny Committee and a representative of the Parent Carer Forum and this helps to ensure a cross section of views are heard.

Regarding out of area placements Somerset CCG delegates the management of out-of-area placements to its Provider, Somerset Partnership FT (SPFT). This is intended to promote clinically-led decision-making & management of these complex cases.

As at 30/11/2018, there were 14 Somerset children & young people under the care of a Tier 4 CAMHS or LD service. Of this 14, 13 were out-of-county. The

Providers are in different locations in England, the furthest away being in Staffordshire.

To put this number in context, the SPFT CAMHS caseload (Tier 3, Community Eating Disorders Service & Enhanced Outreach Service) is c1,200 children & young people. In other words, the vast majority of Somerset children & young people receiving CAMHS treatment are receiving it in-county from the local provider.

Recent investments in CAMHS in Eating Disorders & Enhanced Outreach (crisis resolution & home treatment) have enabled local treatment of cohorts of children & young people who (a few years ago) would have been treated out-of-county. These services are sometimes referred to as “Tier 3.5”, largely because they include options for local in-patient treatment.

The “tiering” model currently in use predicts for Somerset a Tier 4 population of about 60 children & young people. Looking at this Tier 4 case-load and the caseloads & waiting-times of Tier 3.5 CEDS & EOT, we are relatively confident that (at this level) the clinical need is being met. In relation to that part of the question about support offered to parents, families & carers, further information has been requested.

### **Item 8 – SEND Update**

#### **Somerset Parent Carer Forum ask:**

Please can you clarify when the Autism Education Trust (AET) training to mainstream schools will be rolled out. Will it include academies early years settings and colleges? Will the basic level also be given to transport escorts to ensure a constancy for children and young people?

We often have parents asking for information about the bases and special schools and there is still an element of mystery around what each one does. Will the capital work to increase spaces also included work to ensure the offer is clearly communicated with local families?

#### **Response**

AET training for schools will be available from March this year, with bookings currently being taken. This training will be available to all education settings, including early years and FE colleges on a traded basis. Tier 1 training is recommended for all and would be suitable for all school based staff. The Autism and Communication Advisory Service will also adapt and deliver training for travel escorts. There are a number of useful resources which are available free on-line: <https://www.autismeducationtrust.org.uk/> Schools and parents are able to download Autism Standards and Guidance for free using this link.

Work has been undertaken to clarify the offer from Special Schools and this information is available. A Service Level Agreement (SLA) for those schools who currently have an Autism Resource Base on their schools site is currently under review and plans are to have these finalised by the end of February 2019. This will ensure clarity around the offer from the Autism Bases. If your

child is in the process of obtaining an EHCP, or identifying a suitable placement, the SEND Casework Team will consult with settings which are appropriate to meet their needs and provisions that you wish to be consulted.

Paediatrics and CAMHS have weekly triage meetings. Autistic children with MH needs will be seen by CAMHS; at the same time many ASD children with behavioural/emotional needs should have intervention from ASD and behavioural services.

It is also important for all children to have intervention for behavioural & emotional difficulties from appropriate tier services.

**Cassandra Davies asks:**

Why is it that the local area needs assessment has not incorporated those who are learning disabled and/or are autistic and display behaviour that may appear challenging.

Guidance around these services is specified under NICE Guidance NG93 and is not currently commissioned by Somerset CCG.

Those who experience these needs are the most likely to have complex support needs in terms of education and mental health.

These young people are not having their needs identified in the strategic needs assessment and therefore not as part of the statutory assessment process.

This is a legal issue and means that these young people are experiencing discrimination under the SEND Strategy, Joint Commissioning Strategy and the Statutory Assessment Process.

What is being done to address this? What is being done to address the high figures for SEMH and below average figures for ASD?

It appears that many SEMH cases may be cases of undiagnosed Autism.

The previous autism strategy showed that most young people in Somerset were diagnosed with autism between the ages of 14-19 yrs.

By this time the opportunity for early help interventions has well and truly passed. Failing to identify autism in a timely way means that autistic young people

may have experienced many years without reasonable adjustments appropriate to their needs and therefore suffered discrimination and even trauma in education.

Receiving appropriate autism specific support, early on in a timely manner means that educational needs can be met early on.

Reducing the risk of MH issues and the need for higher level interventions, so is more cost effective.

How does the Joint Commissioning Strategy specifically address these historic failings?

How does the Joint Commissioning Strategy plan to address the issues of discrimination of young people with complex neurodevelopmental disability?

Currently these young people are not having their educational needs identified as part of the statutory assessment process?

Current assessment services are limited, and no pathways are made available to NHS England commissioned complex neurodisability services which provide multidisciplinary team assessment.

Paediatric services in Somerset refuse to make referrals to these services on parent request. Access to these pathways does not incur local cost but appears to be an attempt to hide the needs of those with complex neuro developmental disability.

Failing to identify the provision and reasonable adjustments needed around support and ineffectively using SEND investment on inappropriate provisions. Early access to more specialist services supports young people to meet their potential, reduces the risk of MH issues and helps to prevent the need for more involved and costly provision in the longer term.

### **Response**

The local area needs assessment refers to all CYP with SEND and partners are committed to effective joint working between Health, Education and Social Care. This includes the groups you refer to, those with ASC and learning disabilities.

There are currently six groups leading the work on improving our local area in relation to Special Educational Needs and Inclusion. One of these groups is the joint commissioning group and has a number of participants working towards more effective commissioning practices and improving outcomes for children and young people with complex needs.

There are a number of other workstream relevant to your question, including 'Identifying and Managing Challenging Behaviour'. This group is jointly led by the Designated Medical Officer and a Strategic Manager from the Inclusion Service and will include engagement from parents. Planning for this will come from feedback from the planned parent roadshows. The initial focus is on accurately identifying the underlying cause of behaviour presentations, to facilitate early intervention and accurate support for children and young people.

However currently Paediatrics and CAMHS have weekly triage meetings to discuss children .Autistic children with Mental Health needs will be seen by CAMHS; at the same time many ASD children with behavioural/emotional needs should have intervention from ASD and behavioural services and from paediatrics perspective, the majority of ASD diagnoses are made between ages 4-7. Some children with High functioning -ASD are diagnosed later and there is clear guidance in place for referrers considering ASD. Specifically MDT assessment forms a core part of managing all children with complex ND and paediatrics will work with families to ensure appropriate teams are involved.

### **Marianne Evans asks:**

I would like to ask a question to be asked at the meeting, I'm unable to attend. I ask on behalf of families with children with epilepsy, which is a neurological medical condition. Why is it that EHA"s are not being carried out so that services can be implemented to help the vulnerable.

Also, when a child with epilepsy has an EHCP awarded why are they not using a neuropsychologist to help implement a person centred approach to their educational healthcare plan. Children with epilepsy are known to struggle with memory problems and also have additional needs too which are not being recognised. What is being done to bring young people's diagnostic services in

line with NICE Guidance, in order to support the Joint Commissioning Strategy? (E.g. Occupational therapist)

**Response**

The Local Area is aware that the implementation of the EHA as the primary method for accessing support for children and young people with additional needs has presented some difficulties for GPs. The refinement of this process is ongoing with multi-agency support.

Parents of children with draft EHCPs should ensure they are happy with the content of the plan and feel that it has had sufficient input from the appropriate professionals, including health professionals. If there is some uncertainty about this it is recommended that you continue to work with your Case Work Officer to finalise the plan.

Many children with epilepsy will have SEND so will have High needs funding or an Education health and care assessment. Others should have support through a Medical Plan.

**Family Voice Somerset ask:**

Are the SEND consultations Jointly commissioned?  
Are the SEND consultations including the recent survey by Public Health?  
The public health responses questions the delivery of your 5 key strategic outcomes, in emphasising inclusion, quality, timely and positive experiences.

**Response**

The health and well-being survey asked children about their health and well-being and we did generate a report about children who self identified as SEND and their health and well-being, but the survey did not ask children for their view on the SEND strategic outcomes, so I do not understand the question and as I had a prior commitment was not present when the question was asked

Why is the local offer not included in the joint commissioning partnership. When can we expect a time line for a local offer that reflects what is local, what is available and not just a website? There are still to many gaps missing from the Children and families act 2014 and SEND COP

Please can all the autism bases and other bases recently re commissioned that are missing or currently ask families to contact the LA for the SEN policy, please consider the 6.79 SEND COP where this information must be on a website.

**Response**

Work to agree final Service level agreements are in progress and when complete will be available

When will families be informed or offered a consultation on the restructuring of the SSE services that also include more than the PIMS services?

Has all 700 PIMS consultation invitations been sent, please could this be followed up as many families on our social media group have questioned that they were not aware. The breadth of the consultation needs to be questioned in

terms of it being more accessible to parents who may have caring responsibilities.

Webinars and online questionnaires give more flexibility.

The PIMS service is also referenced in the schools building protocols, Have the PIMS team been involved with the building development for all the new schools and extensions?

In 2014 a document was created to list many of the health conditions known to Somerset, and listing if they would need PIMS, health care plan or EHCP. Many of the staff who worked on this service have left the services they represented. This document shows:

- 147 health conditions that the hospital and the LA recognised as needing PIMS support.
- 130 health conditions that may or would need a school health care plan and PIMS
- 98 health conditions that may or would need an EHCP and PIMS
- 96 Health conditions that may or would need an EHCP, school health care plan and PIMS

How are these requirements being jointly commissioned in line with children and families act 2014 section 25 and 26.

What is the process for commissioning the equipment to support children with SEN who have a medical condition with the requirements (for CFA2014 section 25&26)?

### **Response**

The LA and CCG are currently developing our joint commissioning arrangements.

Please could we have more information on the actual protocols being suggested and the pathways between “Maintained schools must make arrangements to support children with medical conditions” and “Health professionals may be commissioned in a variety of ways”

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Who will be overseeing that the health plans meet safeguarding requirements to safeguard children?

Where are the joint commissioning for the duties of School Nurses who ideally should be the Practitioner from health working with schools to identify the children who need health referrals, to support early intervention and to support other health conditions that do not require support from PIMS (a further link above)?

### **Response**

The service is a Public Health Nursing Service and so does not provide medical care or advice to children with complex physical health needs, they provide signposting support for health care advice and support for the school and parents. But provide Public Health support and interventions for all children of school age in Somerset. The community paediatric nurses undertake a lot of the health care planning for children with complex needs and support training for schools. Some School Nurses do fulfil medical care, as they have paediatric community nurses within the service but this is not the case in

Somerset. There is no standardised capacity within School Nursing and Somerset has one of the smallest School Nursing workforces in the South West, which SCC inherited from the NHS.

When will the joint commissioning pathway for visual needs be consulted on? The learning difficulty clinics who assessed for visual difficulties were stopped without consultation. Visual difficulty pathways appear to be difficult to understand, including CVI. Visual Difficulty clinics are included in The British Association for Child Community Health page 10.

Are the Communication services also being jointly commissioned? It would be very good if the SCC communication services including Facebook and twitter could share the publications from the short breaks newsletters, calendars and other events that frequently are not able to be added to the local offer. The recent pre action letter sent to SCC raises the persistent concerns of consultations, including families and listening to the voices that families raise of the concerns and safety of many families. Will this letter be responded to by 12pm today (Friday) unlike many of the families who write many times in desperation, past their crisis point.

**Response:**

In order to answer your questions regarding SEND consultations we would need to be clear about which consultation you are referring to, however we remain committed to consultation with parents and families. Somerset Parent Carer Forum have a strategic lead in representing parents and families and we are confident that they ensure all relevant consultations are widely shared through a number of channels.

The Somerset Parent Carer Forum will be hosting a series of roadshows in January through to March where the local offer will be a main focus. All families, carers and young people will be invited to attend and contribute their views.

The review of PIMS services has been lengthy and detailed to ensure we are able to meet the needs of those who access the service now, and who may do so in the future. Close links are in place with Health colleagues, and these are now being formalised and strengthened to ensure a robust offer to children and young people with physical, medical and sensory needs. A working party is scheduled for January, where parents, Health professionals, SENCOs, and advisory teams will come together to explore pathways for effective joint working. This is the next step on our journey towards a jointly commissioned service which meets the needs of children and young people in a holistic and person centred way.

**Item 9 - Young Carers Service – (Budget proposal CAF 20)**

**Somerset Parent Carer Forum ask:**

We note from the report that the redesign of the service is now being undertaken by adults commissioning. The needs of young carers is very different to that of adult carers, acknowledged by many councils having separate services. We would like to know how the adult commissioning team



are using the expertise of the existing Young Carers service to help support this work?

**Family Voice Somerset ask:**

**What are the young carers requirements that need to be met by the local authority?**

With the proposed changes of service to lose all the current staff, how will the requirement for providing personal advisors; assistance that welfare, education and training needs to be met; services if a CIN; type of grants available?

**Response:**

Adults Services have not been asked to redesign the Young Carers service. Adults commissioners have experience working with the voluntary and community sector and have been asked to identify opportunities for greater involvement of the community and voluntary sector in Young Carers support to enable Young Carers to share experiences, support each other and get some respite from their caring roles. Adults commissioners have worked with the Children's Participation and Engagement team to ensure that young carers needs are understood and young carers are involved in developing options for community based support:

- Engagement with Young Carers took place during the October half term – these sessions facilitated by Participation and Engagement team in Children's Commissioning looked at:

- 1.What a day in the life of a Young Carer is like
- 2.What help Young Carers access now
- 3.What opportunities Young Carers want for a good future

- The engagement gave the following key insights:

Young Carers shared many emotional issues related to their role. Stress and worry were commonly used words to describe how they felt.

Young Carers value the Young Carers service.

They value having time together and developing relationships with other people that understand their situation (staff and other young carers).

They value the relationship they have with their key worker in the Young Carers team and the support they provide (particularly regarding emotional stress and worries about their caring role)

We also identified that the Young Carers get other forms of support and this differed depending on the needs and age of the child.

Young Carers were aspirational and hopeful for their futures but also knew the barriers they needed to overcome to reach their goals.

- Adults commissioners have also conducted research into what other authorities are doing to involve communities in young carer support and how this is funded. Feedback from the Somerset Parent Carer Forum, Carers Voice and the Young Carers Team is also being sought.

- On 14th December Adults commissioners are holding an engagement event with the voluntary and community sector facilitated by SPARK to:

Share feedback from the Young Carers engagement in Oct Half term holiday

Explore what community-based services already exist for young carers

Identify what support communities could provide together to enable as many young carers to benefit as possible.

Discuss funding opportunities to maximise collective resources.

Adults Commissioners will present the outputs of the engagement process and options for community involvement to Cabinet in February. Should the decision be taken to commission any voluntary and community sector activity to enable young carers to spend time together and, share experiences and gain some respite from their caring roles, the Adults Commissioners have committed to including young carers in the tender process to ensure that they are involved in the decision making process. They will work with the Young Carers team to ensure that this is appropriately planned to fit around the young carers education and caring roles.

### **Item 10 – 2019/2020 Capital Programme**

#### **Somerset Parent Carer Forum ask:**

Appendix B of the report highlights the proposed changes to several education provisions to increase capacity. While we welcome this investment and acknowledge that the additional spaces are needed we note many are academies. Can you confirm that robust service level agreements are in place with these settings, which are being remodelled/extended so as to protect the investment of public money into these sites which are not owned by the local authority?

#### **Response:**

As part of the expansion process, Academies are required to submit a significant change application for an increase in places of more than 30 pupils. This application (which makes it clear that additional places are required for basic need and being funded by the Local Authority) is made to the Education and Schools Funding Agency and is approved by the Regional Schools Commissioner. An increase in additional places requires a variation to the Academy's Funding Agreement. The Funding Agreement is the Secretary of States contract with the Academy Trust.

### **27 Scrutiny Work Programme - Agenda Item 5**

The Committee Chair introduced the reports that make up the work programme agenda item and the importance the Committee should attach to planning its future work.

The Committee then considered and noted the Cabinet's Forward Plan of proposed key decisions in forthcoming months.

The Committee considered and agreed its own work programme and the future agenda items listed. It was noted that the CYPP would be re-considered at the January meeting.

In addition, it was agreed that the Chair and Vice Chair would hold a meeting to discuss future agenda items.

Attention turned to the Tracker and it was agreed to send each tracked item to the named officer to ensure that the Tracker was brought up-to-date.

28 **Annual Report of the Director of Public Health 2018 – Hospital Admissions for Self-Harm in Somerset - Agenda Item 6**

The Committee considered this report from the Director of Public Health that provided analysis of available data to help understand the apparent high rates of self-harm in Somerset. It was explained that the picture was highly complex, with only hospital admissions being easily measurable. Such admissions were typically the result of paracetamol overdoses by young women rather than self-cutting (as self-harm is often discussed).

It was reported that most admissions for overdoses were 'one-off', rather than repeated incidents. This implied that an approach based on universal (tier 1), or more specialist (tier 2) services would be more effective than one based on more complex tier 3 and 4 services. It was also noted that the protective and preventative benefits of emotional health and wellbeing should be taken into consideration in all services for children and young people, especially girls between the ages of about 13 and 20.

Members were reminded that Somerset had a 'red dot' for self-harm admissions to hospital, meaning that its rate of admissions was much higher than England as a whole. Previously it had been assumed this was a result of effective admission and assessment of self-harm at Somerset hospitals. However over recent years the rates in Somerset had risen still further meaning a rate much higher than the national average.

There was a discussion and in response to a question it was stated that analysis of the figures showed that the majority of self-harm admissions were for overdoses, particularly of paracetamol and other painkillers, and were predominantly taken by young women. Overall such admissions were 'one-off', which seemed to indicate that they might be a response to a personal crisis rather than a symptom of longer term mental ill health. It was further explained that evidence suggested that those overdoses were very rarely attempted suicides, and there did not appear to be a clear link between self-poisoning and the bulk of 'low level' self-harm, which was predominantly self-cutting.

It was stated that this behaviour suggested that the most effective response would be to strengthen the support available to young people, especially girls, at Tiers 1 and 2 (universal services and those for relatively common and low-level need). This would help to promote their own resilience in the face of the unavoidable difficulties of adolescence; however, evidence suggested that availability of such support was patchy and uncoordinated in Somerset. Rather than being a health problem that needed treatment in the NHS, support can often be provided through schools, although it was noted parents, GPs and other professionals would benefit from more available guidance and services to improve young people's wellbeing.

In summary the conclusion seemed to be that evidence pointed to the most effective interventions being the overall promotion and support of mental health and emotional wellbeing for all young people, especially girls, rather than providing specialist services. The Chair of the Committee reflected that the mental health and well-being of others was a matter for all, not just the NHS.

The report was accepted and it was requested that a further update be considered at the June meeting.

**29 2015-2020 Somerset Local Transformation Plan for Children and Young People Emotional Health & Wellbeing - Agenda Item 7**

The Committee considered this report that explained that Somerset CCG was required by NHS England to “refresh” the 2015-2020 Somerset Local Transformation Plan (LTP) for Children & Young People’s Mental Health & Learning Disabilities (CYP MH/LD). As part of that process the CCG would work with its partners to review both its strategy & the commissioned services currently in place in Somerset and would then embed those findings into local joint plans.

It was explained that after a period of some dislocation & challenge the review would ensure that strategic plans and services for CYP MH/LD in Somerset were both fit-for-purpose and in line with those of other local health & care communities.

In response to a question it was stated that in order to ensure that the review and refreshed plan supported the Children & Young People’s Plan (CYPP) 2019-2022 the review would report to the Programme Board overseeing Programme 3 (Improving Emotional Health & Well-being) of the Somerset Children’s Trust. The review would also explore longer-term issues beyond the span of the LTP, i.e. 2020 and beyond, and this would feed into the “Fit for My Future” programme as well as the CYPP.

It was reported that increased funding had permitted the CCG to deliver significant investment into local services, such as a stand-alone Community Eating Disorders Service (CEDS) and an expanded Enhanced Outreach Team (EOT - crisis & home treatment for CYP). The establishment & growth of those services represent significant achievements by the NHS and partner agencies in Somerset.

There was a discussion of the report and it was noted that the LTP Programme Board included a range of partner representatives, including a member of this Committee and a representative of the Parent Carer Forum. Members also voiced concern at the combining of mental health with learning difficulties as a workstream and it was confirmed this was the adopted approach of the CCG. The Committee thought that this was not an appropriate link and an unfortunate policy and suggested that thought be given to amending it.

The update was accepted.

**30 Special Educational Needs and Disability (SEND) update - Agenda Item 8**

The Committee considered this report that provided a summary of the activity and progress made by the Local Area Improvement Network (LAIN) and Officer led activity since the previous update, last June. Members were reminded that

the progress against the SEND Strategy Outcomes were monitored through the Local Area Improvement Network (LAIN), which was accountable to the SEND Improvement Board, Children's Trust Board (as part of the CYPP) and to the Health and Well-Being Board.

It was reported that the LAIN has 6 programmes and each programme had a committed SEND champion to lead the programme and worked collaboratively across multi-agency partners to increase the pace of transformation across the Local Area. The LAIN also assisted SEND inspection preparation and communications to partners. The 6 LAIN programmes had been broadly shaped into 3 themes, all which supported the 5 Somerset SEND strategy objectives.

The report contained an update on 'getting a good operational grip', 'resetting the strategic partnerships' and 'making it feel different'. Members considered the report and answers were provided to questions about resources and capacity particularly to support geographical equity. It was also noted an application for a Special free school had been made to the Department for Education for South Somerset to provide for children with social, emotional and health needs and speech, language and communication needs.

The report also provided an update on the implementation of changes to the Physical Impairment and Medical Support team (PIMs) team, with feedback from the engagement events which had been held with families and updates from plans to co-produce a new service delivery model.

A series of events for parents had been held across Somerset and over 700 invitations were sent to parents/partners. Parents were asked to identify what they felt was currently working well children and young people. It was noted that when asked what wasn't working so well the comments focused on the need for education and health care professionals to interact and a lack of clarity regarding who co-ordinates support for a child with multiple needs.

The current operating model in Somerset was reviewed and models from other areas were considered. Opinions were sought on 3 proposed models for Somerset and parents were asked to comment on the perceived benefits and drawbacks of each model.

It was explained that a co-produced service design would realise efficiencies for the Council with a minimum impact on the level of delivery, whilst improving the clarity of co-ordination of support to the children and young people in line with parents and young people's wishes. Officers would arrange a task and finish group to assist with the design of the new integrated PIMS and Sensory service.

The update was accepted.

**31 Young Carers Service Update - Budget savings proposal CAF20 - Agenda Item 9**

The Committee considered this report that explained that Officers were identifying opportunities for greater involvement of the community and voluntary sector in Young Carers support. It was explained that following the withdrawal

of the proposal submitted to the meeting of the Cabinet last September an engagement exercise was being undertaken.

It was noted that this was different from a consultation as an engagement exercise was focused on obtaining general feedback and opinions whereas a consultation would be focused around specific proposals and there were no proposals currently for the Young Carers Service.

Officers had been working with the existing service and Young Carers to look at options to ensure the continuation of providing good outcomes for Young Carers and a sustainable service offer for the future. The current service model would therefore continue while the engagement work was undertaken so that Young Carers continued to receive support.

The report set out that the previous savings proposals were to be re-presented to Cabinet in February 2019 to provide assurance that the voluntary sector had the capacity to provide support services to the standard provided by the Council and the ability to access funds which were not open to the Council. It was noted that any future proposals would achieve a £200K saving to the Children's budget for 2019/20.

It was explained that Officers were now exploring how the Young Carers services could be delivered differently in the future to ensure good outcomes for Young Carers as well as achieving good value for money, so the Council could ensure the provision was fit for the future.

It was noted that there were engagement events planned in different locations across the County and all Members were encouraged to attend. The report was accepted.

## 32 **2019-2020 Capital Programme - Agenda Item 10**

The Committee considered this report that set out the proposed capital programme for 2019/20. Members noted that the programme primarily related to the assets which were held or used by the Council to operate or support the services provided to Somerset residents and included such assets as Schools and Highways. It was noted that capital expenditure involved the acquisition, creation or enhancement of fixed assets with a long-term value to the Council. It did not therefore support the day-to-day running costs of Council services which were met from the Revenue Budget.

It was reported that previously capital programme approvals had been given on an annual basis with only consideration given to future years. However, some larger projects, lasting more than one year, would require further approvals to complete them. It was now proposed to set out the approvals for the anticipated Capital Programme up to 2022/23 and this would allow for better project planning of whole schemes and enable commissioners to procure under best value frameworks.

Attention turned to the 'Schools basic need programme' and it was noted that in 2018/19, the Council approved a programme to provide additional schools

basic need places over four years. This was in part funded by up to £120m of borrowing. A further investment programme was proposed for 2019/20 and the subsequent three years, but this has now been reviewed in the light of the financial pressures on the Council.

It was noted that the proposed schools programme for 2019/20 and beyond would be based on available grant, S106 contributions and the existing borrowing approval given in February and May 2018. The programme had been designed to meet the identified needs up to 2021 and appendix B of the report showed the basic need requirements that funding sought to fulfil.

In response to a question it was stated that the schools and number of places and where they would be needed in Somerset between now and 2021 had been estimated having taken account a wide range of information and would be subject to change as the programme developed over the next few years. Looking ahead Members heard that the Council would continue to seek further funding to support the addition of school places and avoid the requirement for borrowing.

The Committee agreed to note the report.

**33 Any other urgent items of business - Agenda Item 11**

After ascertaining that there no other items of business the Chair thanked all those present for attending and closed the meeting at 13:27 wishing everyone a Merry Christmas and a Happy New Year.

**(The meeting ended at 1.27 pm)**

**CHAIRMAN**

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## Somerset County Council Forward Plan of proposed Key Decisions

The County Council is required to set out details of planned key decisions at least 28 calendar days before they are due to be taken. This forward plan sets out key decisions to be taken at Cabinet meetings as well as individual key decisions to be taken by either the Leader, a Cabinet Member or an Officer. The very latest details can always be found on our website at:

<http://democracy.somerset.gov.uk/mgListPlans.aspx?RPId=134&RD=0&FD=1&bcr=1>

Regulation 8 of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012 defines a key decision as an executive decision which is likely:

(a) to result in the relevant local authority incurring expenditure which is, or the making of savings which are, significant having regard to the relevant local authority's budget for the service or function to which the decision relates; or

(b) to be significant in terms of its effects on communities living or working in an area comprising two or more wards or electoral divisions in the area of the relevant local authority.

The Council has decided that the relevant threshold at or above which the decision is significant will be £500,000 for capital / revenue expenditure or savings. Money delegated to schools as part of the Scheme of Financial Management of Schools exercise is exempt from these thresholds once it is delegated to the school.

Cabinet meetings are held in public at County Hall unless Cabinet resolve for all or part of the meeting to be held in private in order to consider exempt information/confidential business. The Forward Plan will show where this is intended. Agendas and reports for Cabinet meetings are also published on the Council's website at least five clear working days before the meeting date.

Individual key decisions that are shown in the plan as being proposed to be taken "not before" a date will be taken within a month of that date, with the requirement that a report setting out the proposed decision will be published on the Council's website at least five working days before the date of decision. Any representations received will be considered by the decision maker at the decision meeting.

In addition to key decisions, the forward plan shown below lists other business that is scheduled to be considered at a Cabinet meeting during the period of the Plan, which will also include reports for information. The monthly printed plan is updated on an ad hoc basis during each month. *Where possible the County Council will attempt to keep to the dates shown in the Plan. It is quite likely, however, that some items will need to be rescheduled and new items added as new circumstances come to light.* Please ensure therefore that you refer to the most up to date plan.

For general enquiries about the Forward Plan:

- You can view it on the County Council web site at <http://democracy.somerset.gov.uk/mgListPlans.aspx?RPId=134&RD=0&FD=1&bcr=1>
- You can arrange to inspect it at County Hall (in Taunton).
- Alternatively, copies can be obtained from Scott Wooldridge or Michael Bryant in the Democratic Services Team by telephoning (01823) 357628 or 359500.

To view the Forward Plan on the website you will need a copy of Adobe Acrobat Reader available free from [www.adobe.com](http://www.adobe.com)  
Please note that it could take up to 2 minutes to download this PDF document depending on your Internet connection speed.

To make representations about proposed decisions:

Please contact the officer identified against the relevant decision in the Forward Plan to find out more information or about how your representations can be made and considered by the decision maker.

The Agenda and Papers for Cabinet meetings can be found on the County Council's website at:  
<http://democracy.somerset.gov.uk/ieListMeetings.aspx?CId=134&Year=0>

Weekly version of plan published on 1 January 2019

FP Refs	Decision Date/Maker	Details of the proposed decision	Documents and background papers to be available to decision maker	Does the decision contain any exempt information requiring it to be considered in private?	Contact Officer for any representations to be made ahead of the proposed decision
<p><b>FP/18/10/09</b> First published: 30 October 2018</p>	<p>7 Jan 2019 Cabinet Member for Adult Social Care</p>	<p>Issue: AIS Renewal and Replacement Contract Award Decision: Extension of the current support and maintenance contract for the Adults Information System (AIS), the Council's existing Adult Social Care (ASC) case management application and approves the award of the call-off contract for an Adult Social Care software application</p>	<p>Renewal &amp; Replacement of the Adults Information System Tender Evaluation Report - Replacement Adults Social Care System_111218 AIS Replacement_Key Decision_Project Risks Appendix 3_261118 AIS KMD Glossary</p>		<p>Stephen Chandler, Director of Adult Social Services Tel: 01823 359025</p>
<p><b>FP/18/11/03</b> First published: 16 November 2018</p>	<p>14 Jan 2019 Cabinet Member for Highways and Transport</p>	<p>Issue: Parking Policy Review and Implementation Plan Decision: It is proposed to carry out a comprehensive review of each towns on-street parking controls on a rolling programme, looking at each community in turn to ensure a fair balance between the needs of residents, businesses and visitors. Consideration will also be given to ensuring safety; keeping the key routes free of congestion and the appropriateness of existing restrictions. A full consultation exercise for each town will take place with all stakeholders (District, Town/Parish Councils) and the community to identify all issues.</p>	<p>Parking review Key Decisions Nov 2018 v5 (003)_ Parking Review and Implementation Plan Nov18 - Appendix A V4 Parking Review and Implementation Plan - Appendix B V3</p>		<p>Bev Norman, Service Manager - Traffic Management, Traffic &amp; Transport Development Tel: 01823358089</p>

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<b>FP/18/12/106</b> First published: 17 December 2018	Not before 21st Jan 2019 HR & OD Director	Issue: Step-Up to Social Work Contract Extension Decision: To agree to continue the contract ith the University of the West of England			Vickie Wright
<b>FP/18/11/11</b> First published: 21 November 2018	Not before 21st Jan 2019 Cabinet Member for Adult Social Care	Issue: Decision to conclude the establishment of an Open Framework Agreement for Reablement Providers in Somerset Decision: To award an open framework that will ensure continued and new supply of reablement care across the county,mirroring the current arrangement for homecare. This follows interim contractual arrangements that were put in place following the unsuccessful			Tim Baverstock, Strategic Commissioning Manager - Strategic Commissioning
<b>FP/18/10/03</b> First published: 23 October 2018	Not before 23rd Jan 2019 Cabinet Member for Education and Council Transformation	Issue: A change to the protocol for schools converting to a sponsored academy retaining any surplus revenue balances, and the charging for academy conversions by the authority Decision: To consider the report			Ken Rushton, Service Manager - School Finance Tel: 01823356911

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<b>FP/18/07/05</b> First published: 17 July 2018	23 Jan 2019 Cabinet	Issue: Equality Objectives 2019 - 2023 and Equality Commitment Decision: Asking Cabinet to agree a new set of Equality Objectives for 2019 - 2023 and the new Equality Commitment			Tom Rutland Tel: 01823 359221
<b>FP/18/11/04</b> First published: 16 November 2018	23 Jan 2019 Cabinet	Issue: Proposed Capital Investment Programme 2019/20 Decision: To consider the proposed Capital Investment Programme for 2019/20+ and to recommend this to Council for approval			Peter Lewis, Interim Director of Finance
<b>FP/18/11/07</b> First published: 16 November 2018	23 Jan 2019 Cabinet	Issue: Revenue Budget Monitoring Update Decision: To provide an update on the 2018/19 Revenue Budget and agree any management actions required			Peter Lewis, Interim Director of Finance
<b>FP/18/10/08</b> First published: 30 October 2018	23 Jan 2019 Cabinet	Issue: Admission Arrangements for Voluntary Controlled and Community Schools for 2020/2021 Decision: To agree the admission arrangements for voluntary controlled and community schools for 2020/21			Jane Seaman, Access and Admissions Manager Tel: 01823 355615

FP Refs	Decision Date/Maker	Details of the proposed decision	Documents and background papers to be available to decision maker	Does the decision contain any exempt information requiring it to be considered in private?	Contact Officer for any representations to be made ahead of the proposed decision
<p><b>FP/19/01/02</b> First published: 3 January 2019</p>	<p>Not before 28th Jan 2019 Interim Finance Director</p>	<p>Issue: Acceptance of European Regional Development Funding for the Heart of the South West Inward Investment Project Decision: Approval for Somerset County Council (SCC), in its capacity as the accountable body for the Heart of the South West Local Enterprise Partnership, to accept £1,181,308 of European Regional Development Funding (ERDF) for the Heart of the South West Inward Investment Project and to enter into an associated funding agreement with the Ministry for Housing, Communities and Local Government (MHCLG)</p>			<p>Paul Hickson, Strategic Manager - Economy and Planning Tel: 07977 400838</p>
<p><b>FP/18/12/08</b> First published: 18 December 2018</p>	<p>28 Jan 2019 Cabinet Member for Children and Families</p>	<p>Issue: Decision to extend contracts for Pathway to Independence (P2i) service for young people in Somerset Decision:</p>			<p>Rowina Clift-Shanley, Senior Programme Manager , Business Change</p>
<p><b>FP/18/12/07</b> First published: 20 December 2018</p>	<p>28 Jan 2019 Director for Economic and Community Infrastructure Commissioning</p>	<p>Issue: Decision to make a funding agreement with Taunton Deane Borough Council for a contribution to the M5 Junction 25 Improvement Scheme Decision: To sign a funding agreement and accept a £1.5m contribution to the construction of the highways improvement scheme.</p>			<p>Sunita Mills, Service Commissioning Manager Tel: 01823 359763</p>

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<b>FP/18/10/11</b> First published: 30 October 2018	28 Jan 2019 Director of Corporate Affairs	Issue: Microsoft Software Supplier Decision: To agree a 3 year contract award for the supply o Microsoft software licences and support			Andy Kennell Tel: 01823359268
<b>FP/18/03/04</b> First published: 12 March 2018	Not before 28th Jan 2019 Cabinet Member for Highways and Transport	Issue: Procurement for the construction of traffic signals improvements at the Rowbarton junction in Taunton Decision: To commence the process to secure a contractor to deliver the scheme to improve the traffic signals at Rowbarton junction in Taunton			Sunita Mills, Service Commissioning Manager Tel: 01823 359763
<b>FP/18/02/08</b> First published: 13 February 2018	Not before 28th Jan 2019 Cabinet Member for Highways and Transport	Issue: Taunton Transport Strategy Decision: To agree to adopt the joint (with TDBC) Taunton Transport Strategy			Lucy Bath Tel: 01823 359465
<b>FP/17/09/04</b> First published: 11 September 2017	Not before 28th Jan 2019 Director of Finance, Legal and Governance, Director of Commissioning and Lead Commissioner for Economic Community Infrastructure	Issue: iAero (Yeovil) Aerospace Centre (2,500 sq m) Acceptance of ERDF Funding Decision: The acceptance of the offer of ERDF funding (£3.5 million), for the iAero (Yeovi) Aerospace Centre			Lynda Madge, Commissioning Manager – Economy & Planning Tel: 01823 356766

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<b>FP/18/11/01</b> First published: 13 November 2018	28 Jan 2019 Cabinet Member for Highways and Transport	Issue: Decision to extend the contract for Parking Enforcement and Related Services Decision: To extend the existing contract until June 2022 with appropriate break clauses			Steve Deakin, Parking Services Manager, Parking Services, Community and Traded Services Tel: 01823355137
<b>FP/18/08/01</b> First published: 7 August 2018	Not before 28th Jan 2019 ECI Operations Director	Issue: Award of Concession Contract for the Provision of Cashless Parking Services Decision: To award a 5 year contract with an option for a further 2 year period to provide a "pay by phone" option for payment of car parking charges at Council locations within Somerset			Steve Deakin, Parking Services Manager, Parking Services, Community and Traded Services Tel: 01823355137
<b>FP/19/01/03</b> First published: 3 January 2019	28 Jan 2019 Cabinet Member for Highways and Transport, Cabinet Member for Resources and Economic Development	Issue: Somerset County Council Land Drainage Enforcement Policy Decision: To approve and agree the implementation of a Land Drainage Enforcement policy for the County Council's powers under the Land Drainage Act 1991			Martin Young, Finance Strategy Manager Tel: 01823 359057
<b>FP/18/06/08</b> First published: 19 June 2018	Not before 28th Jan 2019 Director of Commissioning and Lead Commissioner for Economic Community Infrastructure	Issue: To approve the appointment of a supplier to deliver the Wiveliscombe Enterprise Centre and Wells Technology Enterprise Centre Decision: To approve the appointment of a supplier			Nathaniel Lucas, Senior Economic Development Officer Tel: 01823359210



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<b>FO/18/12/03</b> First published: 10 December 2018	Not before 28th Jan 2019 Cabinet Member for Highways and Transport	Issue: Allocation of Budget 2018 Maintenance Grant Decision: To consider this report			Mike O'Dowd-Jones, Strategic Commissioning Manager – Highways and Transport Tel: 01823 356238
<b>FP/18/12/02</b> First published: 10 December 2018	Not before 28th Jan 2019 Cabinet Member for Highways and Transport, Cabinet Member for Economic Development, Planning and Community Infrastructure	Issue: Somerset County Council Land Drainage Enforcement Policy Decision: To approve and agree the implementation of a Land Drainage Enforcement for the County Council's powers under the Land Drainage Act 1991			Daniel Martin, Service Manager – Flood Risk Management Tel: 01823356994
<b>FP/18/11/10</b> First published: 20 November 2018	4 Feb 2019 Economic and Community Infrastructure Commissioning Director, Cabinet Member for Economic Development, Planning and Community Infrastructure	Issue: Decision to approve revisions to the Connecting Devon and Somerset phase 2 deployment contracts Decision: To approve revisions to the Connecting Devon and Somerset phase 2 deployment contracts			Nathaniel Lucas, Senior Economic Development Officer Tel: 01823359210
<b>FP/18/12/09</b> First published: 20 December 2018	Not before 4th Feb 2019 Cabinet Member for Resources	Issue: Disposal of part of the Six Acres Day Centre site, Taunton Decision: Disposal of part of the Six Acres Day Centre site, Taunton			Charlie Field, Estates Manager, Corporate Property Tel: 01823355325

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<p><b>FP/18/11/09</b> First published: 20 November 2018</p>	<p>Not before 4th Feb 2019 Director of Children's Services</p>	<p>Issue: Framework for the delivery of Food Produce to SCC properties Decision: Decision to award contract(s) to the successful supplier(s) following a competitive procurement exercise</p>			<p>Simon Clifford, Customers &amp; Communities Director Tel: 01823359166</p>
<p><b>fp/18/11/08</b> First published: 16 November 2018</p>	<p>11 Feb 2019 Cabinet</p>	<p>Issue: Revenue Budget Monitoring Update and Capital Investment Programme update - Quarter 3 2018/19 Decision: To receive an update on the 2018/19 Revenue Budget and Capital Investment Programme delivery as at Q3 2018/19 and agree any management actions required</p>			<p>Peter Lewis, Interim Director of Finance</p>

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<p><b>fp/18/11/05</b> First published: 16 November 2018</p>	<p>11 Feb 2019 Cabinet</p>	<p>Issue: Medium Term Financial Plan 2019-2022 and Annual Budget 2019/20 Decision: To consider the proposed MTFP 2019-2022 and Annual Budget 2019/20, including the nature of expenditure, income and proposals for change (across all council services) required to produce a balanced and robust budget, along with proposed council tax levels and precepts to district councils, prior to recommending these to Full Council for approval in February 2019. Details of the specific proposals for change will be considered by the three Scrutiny Committees during January 2019.</p>			<p>Peter Lewis, Interim Director of Finance</p>
<p><b>FP/18/12/07</b> First published: 18 December 2018</p>	<p>11 Feb 2019 Cabinet</p>	<p>Issue: Investment Strategy Decision: To consider a proposed Investment Strategy for the council in order to support the delivery of council priorities</p>			<p>Peter Lewis, Interim Director of Finance</p>
<p><b>FP/18/11/06</b> First published: 16 November 2018</p>	<p>11 Feb 2019 Cabinet</p>	<p>Issue: Treasury Management Strategy 2019/20 Decision: To consider the proposed strategy prior to recommending this to Full Council for approval</p>			<p>Peter Lewis, Interim Director of Finance</p>

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FP Refs	Decision Date/Maker	Details of the proposed decision	Documents and background papers to be available to decision maker	Does the decision contain any exempt information requiring it to be considered in private?	Contact Officer for any representations to be made ahead of the proposed decision
<b>FP/18/12/04</b> First published: 10 December 2018	20 Mar 2019 Cabinet	Issue: Award of Contract Bridgwater Special School Decision: To consider the report			Phil Curd, Service Manager: Specialist Provision and School Transport Tel: 01823 355165
<b>FP/18/12/01</b> First published: 4 December 2018	14 Feb 2019 Cabinet Member for Education and Council Transformation, Director of Commissioning and Lead Commissioner for Economic Community Infrastructure	Issue: Creation of New Academies in Somerset Decision: Brent Knoll Church of England Primary School; Charlton Horethorne Church of England Primary School; North Cadbury C of E Primary School; Pawlett Primary School			Elizabeth Smith, Service Manager – Schools Commissioning Tel: 01823 356260
<b>FP/18/12/05</b> First published: 10 December 2018	Not before 1st Apr 2019 Cabinet	Issue: The Somerset Children and Young Peoples Plan 2019-2022 Decision: The Children and Young Peoples Plan 2019-2022 is a multi-agency partnership vision for all children, young people and thier families to be happy, healthy and well-prepared for adulthood.			Philippa Granthier, Assistant Director - Commissioning and Performance, Children's Services Commissioning Tel: 01823 359054
<b>FP/18/04/06</b> First published: 30 April 2018	Not before 3rd Jun 2019 Director of Commissioning and Lead Commissioner for Economic Community Infrastructure	Issue: Procurement of the HotSW Growth Hub Service Decision: To undertake the procurement of a Business Support Service (Growth Hub) on behalf of the HotSW LEP			Melanie Roberts, Service Manager - Economic Policy Tel: 01823359209

## Scrutiny for Policies Children and Families Committee Work Programme

Committee meetings	Link to CYPP	Lead Member & Officer
<b>25 January 2019</b>		
Peopletoo overview		Julian Wooster
Medium Term Financial Plan 2019-2022		Peter Lewis
Annual Somerset Safeguarding Children Board		Sally Halls
CYPP Update 2019-2022		Julie Breeze
CAF-14b - Update get-set Level 2 services		Fiona Phur
<b>22 March</b>		
Analysis of GCSEs results including for Children Looked After		Julian Wooster
Autism Strategy		Annette Perrington
Family Support Services update		Phillipa Granthier + Alison Bell
Progress on the Ofsted Inspection outcomes		Julian Wooster + Paul Shallcross
Higher Needs funding provision update		Annette Perrington
<b>26 April</b>		
Pathways to Independence Update		Phillipa Granthier
Regional Adoption & Fostering Agency Update		Julian Wooster + Suzanne Lyus
<b>17 May</b>		
SEND Peer review update		Annette Perrington
CYPP Update 2016-2019 – Year 4 Quarter 4		Fiona Phur
<b>14 June</b>		
Self-Harm Update		Pip Tucker/Trudi Grant
Initial MTFP budget update		Julian Wooster
<b>13 September</b>		
Children's Social Care Statutory Customer Feedback report		Julian Wooster
Q1-Q2 MTFP analysis		Julian Wooster

(What impact does that have on Children in Somerset?)

## Scrutiny for Policies Children and Families Committee Work Programme

<b>18 October</b>		
West Somerset Opportunity Area update		Julia Ridge
Syrian Vulnerable Persons Resettlement Scheme Update		Orla Dunn
CYPP Update 2019-2022 – Year 1 Quarter 1		Fiona Phur
<b>15 November</b>		
Annual Somerset Safeguarding Children Board		Sally Halls
<b>13 December</b>		
CYPP Update 2019-2022 – Year 1 Quarter 2		Fiona Phur
<b>24 January 2020</b>		
<b>13 March</b>		
<b>24 April</b>		
<b>15 May</b>		
<b>12 June</b>		

**Note:** Members of the Scrutiny Committee and all other Members of Somerset County Council are invited to contribute items for inclusion in the work programme. Please contact Democratic Services (01823) 359500 & [democraticservices@somerset.gov.uk](mailto:democraticservices@somerset.gov.uk) who will assist you in submitting your item.

**Possible future items:** A Joint Scrutiny Focus Group on Children’s Services Finances (as suggested by the Peer Review);

(What impact does that have on Children in Somerset?)

## **MTFP Plan for Children's Services – Peopletoo Recommendations update**

Director: Julian Wooster

Authors: Sarah Barrett and Jon Marks, Business Change

Contact Details: [STBarrett@somerset.gov.uk](mailto:STBarrett@somerset.gov.uk) and [JPMarks@somerset.gov.uk](mailto:JPMarks@somerset.gov.uk)

Cabinet Members: Frances Nicholson (Cabinet Member for Children and Families) and Faye Purbrick (Cabinet Member for Education and Council Transformation)

Division and Local Member: All

### **1. Summary**

- 1.1.** This report accompanies the Medium-Term Financial Plan for Children's Services (2019 – 2022) and provides further detail on Section 3 within the report focusing on an update to the Peopletoo recommendation review. This report will provide an update on decisions made in relation to the Children's Service MTFP budget setting process and how recommendations arising from the Peopletoo review report and financial plan have been incorporated and will be taken forward. All financial details relating to the MTFP for the Children's Service budget for 2019/2020 and referenced in this report are outlined in the MTFP report dated Friday 25 January 2019.
- 1.2.** Following a Corporate Peer Review in 2018 a report was commissioned from SCC with Peopletoo. Advisors recommended by the Local Association LGA. The work undertaken was a review of current budgets and existing practice and process across Children's Services, both Children's social care and Education, and identified potential areas of opportunity to safely reduce the projected spend and developed evidenced recommendations which would ensure future sustainability of the service.
- 1.3.** Peopletoo are a private sector management consultancy practice recognised and approved by the Local Government Association that specialise in providing support and advice to local government organisations undergoing significant financial challenge. The review for Somerset County Council Children's services was conducted between June and September 2018. Peopletoo working with the Service developed a three-year programme of savings and efficiencies based on a statutory children's service offer and the continuing transformation of services.
- 1.4.** Significant elements of the three-year programme and recommendations including a financial plan arising from the review were considered by the Senior Leadership Team and Cabinet in September 2018. The Director for Children's Services and Interim Director of Finance have taken these recommendations and elements into account when resetting the Children's Services budget for 2019/20 and the following 3 years as part of reflecting the known service funding and future demand pressures including MTFP savings.





## **2. Peopletoo Proposals**

- 2.1.** A number of opportunities highlighted by Peopletoo are shown in **Appendix A** of this report as a Financial Plan for Children's Services (2019 – 2022). Initial feedback, including moving to a 'statutory minimum service', informed key policy decisions at September 2018's Cabinet. Subsequently further proposals have been developed offering savings to the Local Authority budget. Additional recommendations have been made in relation to the High Needs element of the Dedicated Schools Grant, these require further work before recommendations can be fully considered.

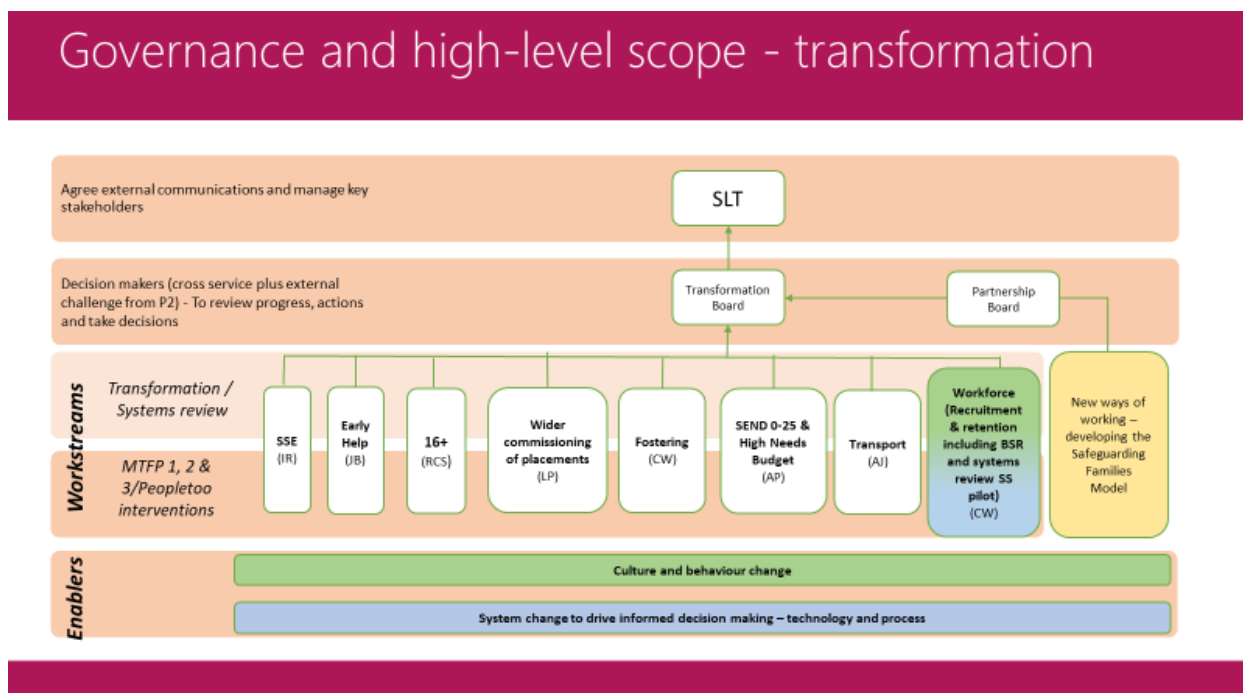
A key theme of the Peopletoo recommendations is to support the improvement of children's commissioning and further develop joint commissioning opportunities with the CCG, District Councils, Public Health and Adult Social Care.

Sections 2.2 to 2.6 below briefly summarise the transformation work planned for 19/20:

- 2.2.** Support for School Improvement (Peopletoo ref F)  
This proposal mirrors MTFP proposal for 19/20 CH 1920-01, proposing to recharge the balance of the salaries of the Primary School Improvement Advisers currently funded by the Local Authority (LA) to the School Improvement Monitoring and Brokering Grant (SIM&B).
- 2.3.** Increase in-house foster carers (K)  
In 2019/20 a further net gain of 10 placements for children with SCC foster carers, to be achieved through improvements in the following areas:
- o Communication and Marketing
  - o Recruitment and Assessment
  - o Retention and Support
  - o Placement sufficiency
  - o Planning for children
- 2.4.** Placements (L/N/O)  
A combination of four opportunities, comprising three identified by Peopletoo and an existing agreed MTFP saving. The proposal sets out a work programme with the overarching objective to reconnect children with their families and includes specifically the reduction in use of independent residential units, returning children placed out of county back to placements in Somerset, and reducing average costs in fostering and residential placements.
- 2.5.** 16+ Accommodation/Unaccompanied Asylum Seeking Children (UASC) (P/R)  
A proposal extending the CAF11 Proposal for Change agreed by Cabinet in September 2018. This proposal highlights activities required to both deliver savings and improve the potential for 16+/UASC people to live fulfilling and independent lives in adulthood.
- 2.6.** Children's Services Business Support (S)  
A proposal linking Peopletoo recommendations alongside activity that has already taken place to identify and deliver reductions in Business Support. Further systems and process work is required to secure the next phase.
- 2.7.** The remaining opportunities for reduction/efficiencies to the Local Authority Budget highlighted by Peopletoo have been adopted through either existing activity or addressed as part of the Financial Imperative Focus to ensure the delivery of a balanced budget in 2018/19.

- Consequently, a Children's Service Transformation Programme (CSTP) has been shaped initially from the recommendations of the PeopleToo review and honed to prioritise areas of high opportunity to transform commissioning and service delivery to ensure that communities are enabled to support their families wherever possible. Integral to the success of this Programme is a focus on workforce development and required cultural change across the service based on an agreed vision and set of shared values and outcomes. This new Programme will replace the Improving Children's Services Programme and will commence reporting from February 2019. It is intended that this Programme will provide the assurance and rigour to track and monitor progress of the transformational activities required to continue to deliver a sustainable budget from 2019 onwards.

The following slide outlines the current scope, workstreams and governance which will form the transformation Programme.



#### Commentary by Director of Children's Services

A transformation board chaired by PeopleToo, comprising members of SLT, has been established to drive the 3-year programme. The programme will be incorporated into the multi-agency Children's & Young People's Plan for 2019-22 which reinforces the commitment to achieve 'good' or better outcomes for children. The work of PeopleToo has assisted in identifying the appropriate budget for children's services. The Transformation programme addresses both funding and practice issues. All the work is aligned to the council's improvement strategy to provide excellent children's services.

## Appendix A

Ref.	Key Area	Comment/Activities	Budget LA	Budget DSG	Budget High Needs	2018/19	2019/20	2020/21	2021/22	Total
A	Troubled Families	2800 Assessments with evidence of Police Incidents closed to NFA, check for positive outcome achieved and allow for 75% failure rate	Income into LA Budget			440,000	248,000			688,000
B	High Needs	Reducing reliance on the independent sector			√	100,000	300,000	300,000	300,000	1,000,000
C	High Needs	Rationalise the SEND specialist support services			√	50,000	950,000			1,000,000
D	SEND Integration	There is an opportunity to reduce spend on SEND Integration			√		38,000	176,800		214,800
E	SSE	Reduce some services funded by either LA or DSG to meet school statutory requirements and charge the SSE to generate income from schools to offset the loss of income - Attendance Function (SSE Education Welfare Service). Whilst a potential efficiency against DSG expenditure, it does provide an opportunity to focus resources to challenge on SEND, Safeguarding and Equalities as part of the LA statutory duties.		√		60,000	144,000			204,000
F	SSE	Reduce some services funded by either LA or DSG to meet statutory requirements and charge the SSE to generate income from schools to offset the loss of income - SSE School Improvement	√			33,000	67,000			100,000
G	SSE	Reduce some services funded by either LA or DSG to meet statutory requirements and charge the SSE to generate income from schools to offset the loss of income - SSE Early Years	√			32,000	168,000			200,000
H	SSE Property Services	Removal of duplication with other Corporate Services	√			45,000	225,000			270,000
I	DSG	Opportunity to rationalise the learning support functions that exist in the LA and SSE including the School Improvement Team and the Somerset Education Partners (SEPs), putting all activity in the SSE and trading services	√	√		25,000	125,000			150,000
J	DSG	There is an opportunity to remove the layer of commissioners, merge the commissioning function with the SSE policy and operational management functions thereby removing a layer of management		√		125,000	125,000			250,000
K	Foster Carers	Increasing the number of in-house foster carers to a ratio of 70% in-house to 30% IFA	√			52,832	132,080	184,912		369,824
L	IFAs	Reducing expenditure on IFAs	√				166,858	166,858		333,716
M	Early Help	Revised Early Help and Edge of Care Offer	√	School Improvement Grant £169k			1,548,428	309,686		1,858,114
N	CSC Residential Placements	Conversion of 8 residential placements to IFAs	√				532,064	532,064		1,064,128
O	CSC Residential Placements	Reducing the cost of Off Contract Residential Placements in line with On Contract	√				141,336	235,560		376,896
P	16+ accommodation	Look to transition 6 young adults identified from semi-independent into P2i. Re-categorise semi-independent accommodation and providers claim Living Allowance Plus for remaining 18+ tenants, claim Living Allowance Plus for in-house accommodation 18+ and secure standard housing benefit for Staying Put 18+	√			184,925	554,775			739,700
Q	CSC Residential Placements	Look to bring 10 placements back into Somerset at av. placement cost in Somerset	√				66,560	66,560		133,120
R	Unaccompanied Asylum Seekers	Reduction in the average weekly unit cost of accommodation commissioned outside of the YMCAs	√				305,032			305,032
S	Business Support	Using technology and process re-engineering to increase the Business Support Worker ratio from 1:4 to 1:6 and in year 3 1:8	√				1,369,166	781,836		2,151,002
T	Passenger Transport	TBC								-
<b>Total</b>						<b>1,147,757</b>	<b>7,206,299</b>	<b>2,754,276</b>	<b>300,000</b>	<b>11,408,332</b>
<b>Investment Requirements</b>										
	DSG	Recruitment of Assistant Director of Education including on costs (deleted from establishment)		√		- 16,166	- 80,834			- 97,000
	External Support					- 75,000	- 75,000			- 150,000
<b>Total</b>						<b>1,056,591</b>	<b>7,050,465</b>	<b>2,754,276</b>	<b>300,000</b>	<b>11,161,332</b>
<b>Income Opportunities</b>										
1	SSE Property Services	Review charges and drive further value for schools through the supply chain					100,000	150,000	250,000	500,000
2	SSE Property Services	Increased Trading of property services to schools				20,000	80,000	150,000		250,000
<b>Total</b>						<b>1,076,591</b>	<b>7,230,465</b>	<b>3,054,276</b>	<b>550,000</b>	<b>11,911,332</b>

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## Medium Term Financial Plan for Children's Services

Lead Officer: Peter Lewis

Author: Peter Lewis, Director of Finance

Contact Details: 01823 359028

Cabinet Member: Mandy Chilcott, Cabinet Member for Resources

Division and Local Member: All

### 1. Summary

- 1.1. The report summarises the key messages from the Medium Term Financial Strategy (2019-22) report presented to Cabinet on 19 December 2018 to enable Scrutiny of relevant service areas ahead of the more detailed budget report being presented to Cabinet and Full Council in February 2019.
- 1.2. The Council recognises the on-going financial challenges confronting it and hence the importance of setting a robust budget for 2019/20 as well as laying foundations for the financial plans for 2020/20 and 2021/22. That means that all the known funding and service demand pressures have been reflected in the budget alongside proposals for reducing spend and hence producing a balanced budget for 2019/20. This produces indicative budgets for each service and this report focuses on those services for which this Scrutiny Committee is responsible.
- 1.3. By way of context, it is important to be aware that since the Cabinet Strategy paper was prepared, the provisional Local Government Financial Settlement has been published by the Ministry of Housing, Communities and Local Government (MHCLG), on 13 December 2018. The final Settlement can be expected early in the new year, although significant change is not anticipated. Alongside the core funding announcements issued in the Settlement, the Council has also received confirmation of several Special and Service specific grants from Government departments. The County's district and borough authorities (the Council Tax collecting authorities) have further up-dated their estimates for the numbers of properties liable for Council Tax next year.
- 1.4. Full details for the funding that the Council will receive will be included in the Cabinet and Full Council reports being prepared for February 2019, while this paper focuses on understanding the services spending requirements and proposed further savings required to be delivered.
- 1.5. It is important for Members to understand the on-going risks within approved budgets, the levels of reserves, balances and contingencies, as well as the mitigations aimed at limiting the impact on core services, especially those prioritised in the County Plan. Relevant links will be drawn out in the detail below.

### 2. Issues for consideration / Recommendations

- 2.1. Against a gross revenue budget of more than £800m annually, and a net revenue budget need for 2019/20 of £338m, (as reported in December 2018), the MTFP Strategy paper showed that funding falls short of spending need by

£28m across the next three years. This means the Council must consider what it delivers and how it is delivered to reduce spending in line with funding.

- 2.2. After applying proposed corporate solutions, details of which will be set out in the February 2019 Revenue Budget report, there remained a gap between spending requirement and funding available across all services of £15m in 2019/20 (before the implications of the recent Settlement are factored in). It is not anticipated that these will make a significant difference to the overall financial challenges the Council faces as most of the improved figures are not envisaged to be sustainable beyond 31 March 2020. However, there may be some opportunity to partially replenish some earmarked or General reserves, which would then have a beneficial impact on the resilience of the Council rather than directly on core services.
- 2.3. In the meantime, this paper sets out the relevant service pressures and movements that made up that gap as well as details of the relevant service additional savings to be considered to produce a balanced budget for 2019/20.
- 2.4. This Committee is therefore **requested** to review the proposed budget and specific proposals for change relating to Children's Services so that they can comment on them, offer assurance to Cabinet and/or identify any matters for consideration that they would like to highlight to the Cabinet.

### **3. Background**

#### **3.1. Spending and Savings Assumptions**

- 3.1.1. This section sets out the main changes to spend and the forecast to deliver previously planned savings for Children's Services, followed by a summary of the indicative budgets across the MTFP period (2019-22).
- 3.1.2. The movements represent changes from the existing MTFP (2018-21) agreed in February 2018 and adopt the previously Cabinet agreed key principle of ensuring robust, transparent budgets are set for 2019/20 onwards. This will place the Council in the best position to effectively monitor service spending needs and funding.
- 3.1.3. For each service, the heading in the following paragraphs reflects the net budget for 2019/20 alongside the net movements for service pressures and savings proposals for each of the three years of the MTFP: 2019/20, 2020/21 and 2021/22

**3.2. Children’s Services: Indicative net budget for 2019/20 £84.884m, net movements (compared to original 2018/19 budget): 2019/20 £18.988m; 2020/21 £0.052m; 2021/22 £1.440m**

*Commentary from Director of Children’s Services*

Following the Corporate Peer Review the Local Government Association, in agreement with the Council, funded PeopleToo to conduct a review of the Children’s Services budget, both children’s social care and education. PeopleToo working with the Service has developed a three-year programme of savings based on a statutory children’s service offer and the continuing transformation of services.

Significant elements of the three-year programme were approved at Cabinet in September 2018 based on a statutory children’s service offer.

The work with PeopleToo has allowed a rebasing of the Authority part of the Children’s Services budget. This will ensure that from 2019/20 (and indeed from the later part of 2018/19) managers have budgets for which they can be held to account allowing for more effective budget monitoring.

**3.2.1. Pressure movements:**

**Table 1** below sets out the incremental service pressures within Children’s Services budgets over the MTFP period followed by an explanation for each.

**Table 1: Pressure movements by type for Children’s Services**

<b>Pressure Type</b>	<b>2019/20 (£m)</b>	<b>2020/21 (£m)</b>	<b>2021/22 (£m)</b>
Demand	21.947	-	0.015
Demography	0.549		0.459
Inflation (Contract)	1.076		0.981
Prior Year Savings Unachievable	4.836	1.155	-
<b>Total</b>	<b>28.407</b>	<b>2.683</b>	<b>1.440</b>

**3.2.2. Demand (Pressure tab) £21.947m/-£0.015m/£0.000m**

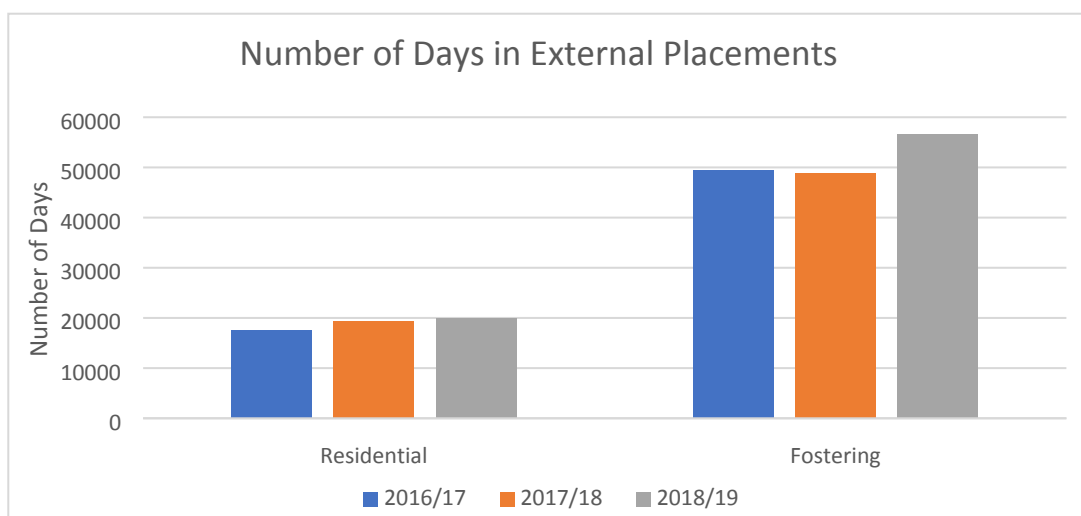
In 2016/17 the Council approved the Children and Young People’s plan (CYPP), which set out the vision for service delivery over a 3-year period. The plan set out the financial resources available to the Service, indicating that additional one-off investment of £6m was needed in year 1, reducing to £3.3m and £0.9m in the following years following the inadequate Ofsted rating received in March 2015. However, the overspend during those 3 years increased from £3.9m in year 1 to the £22m that was reported in month 4 of this year as illustrated in Table 2 below:

**Table 2: Children’s Services net budget 2013/14 to 2018/19**

Financial Year	Budget £m	Expenditure £m	Variance £m
2013/14	67.465	66.061	-1.404
2014/15	64.703	67.350	2.647
2015/16	72.370	77.068	4.698
2016/17	76.532	80.469	3.937
2017/18	73.846	83.565	9.719
2018/19	66.314	88.635	22.321*

\*Prior to one-off rebase of £17.951m (£5m from contingency and 12.951m from latest rebase), also includes all MTFP savings for 2018/19

These overspends have primarily been in relation to the increasing number of external placements for looked after children and increasing costs of placements. The Director of Children’s Services reports that the increased placement costs relate to three elements – the sufficiency of foster and residential care placements for children with complex needs – the impact of child exploitation and associated abuse - and the legacy of poor practice for a number of children when the Council was ‘inadequate’ for children’s services. The chart below shows the increasing length of time children were in external residential and fostering placements since 2016/17; an increase of 14% and 15% respectively.



3.2.3. The average weekly cost of these placements has also increased by 18% and 5% with an average residential placement currently projected at £4,176 per week and a fostering placement £876 per week.

3.2.4. The level of financial resource included in the CYPP for frontline staffing was based upon 1,778 cases and a caseload ratio of 14:1. The number of cases held by the service has increased by 24% to the current level of 2,203 (although this has peaked at 2,541 during 2018/19). The increase in cases has required an increase in baseline establishment to ensure effective service provision whilst keeping the caseload ratio at the target levels. Another factor that has influenced the level of expenditure in the service has been the continuing challenge of recruiting a permanent social work workforce which has resulted in the need to appoint locums at an average additional cost of £0.025m per FTE, a significant financial impact on the Council.



- 3.2.5. The commissioning function within Children's Services was primarily staffed under an invest-to-save agenda, which, due to the financial position of Children's Services as a whole, did not lend itself to these posts securing permanent funding.
- 3.2.6. Additional statutory burdens set out by central government such as Special Guardianship, Staying Put and Unaccompanied Asylum Seeking Children have been placed upon the service with significantly insufficient funding. For those burdens where there was grant funding, such as the SEND Reform grant, the funding has now ceased, but the statutory duties remain unchanged. Approval was also given by Cabinet for improvements to the fees and allowances scheme for foster carers in October 2017, but no additional funding was allocated to the service at that time.
- 3.2.7. Over a number of years the service, as with the rest of the Authority, was not allocated funding for demography or inflation and this has cumulatively impacted on the service, especially given that a significant element of the budget relates to contractual costs for external placements and transport.
- 3.2.8. To address these deficiencies, the budget has been rebased and aims to ensure that Children's Services has a budget that is appropriate for the current and projected level of activity and statutory duties. The additional requirement is £21.388m.
- 3.2.9. The increased number of SEND places commissioned at independent and mainstream Further Education colleges and additional routes required to transport young people between the Bridgwater and Taunton College sites have increased costs and require an additional £0.474m to ensure a budget that covers the full year cost.
- 3.2.10. Due to the cessation of the Special Educational Needs and Disability (SEND) Reforms grant, and our statutory duties under the Children and Families Act 2014 and Code of Practice 2015 remaining unchanged, there is a need to continue to fund the work of our Local Offer platform which is not currently included within the base budget. This along with the anticipated one-off cost of the forthcoming Ofsted SEND inspection requires an additional £0.085m.
- 3.2.11. Demography (Pressures tab) - £0.549m/£0.607m/£0.459m

Projected growth in the number of children coming into the care of the local authority (CLA) has been calculated at £1.236m across 3 years. This is based on population forecasts using the £ per head published in the Local Authority Interactive Tool (LAIT) and the methodology validated by Peopletoo.

Growth in SEND school transport has been calculated based on an additional 25 maintained special school places in 2019/20

- 3.2.12. Inflation (Contract) (Pressures tab) - £1.076m/£0.937m/£0.981m

The annual contractual cost of being part of the regional adoption agency (Adopt SouthWest) is £0.185m higher than the cost of the adoption service previously provided by Somerset County Council. As part of the contract it was also agreed that any annual increase in cost will be charged to the 4 partner authorities as set out in the inter-authority agreement. This is projected as an annual increase of 2% per annum subject to annual review by the board.

Contractual inflation for external placements of looked after children has been calculated as 2% per annum based on Independent Provider Agreements (IPAs) currently in place. It should be noted that inflationary increases are not automatically applied to all contracts.

Contractual inflation for transport has been calculated based on current contracts at 4.3% as per guidance from the Transporting Somerset.

3.2.13. Prior Year Savings Unachievable - £4.836m/£1.155m/£0.000m

3.2.14. Due to the overall financial position of the Council, the service was required to put forward MTFP savings which were agreed without sufficient plans in place for delivery. Ultimately some of these savings remain unachievable and only contribute to the service overspend.

3.2.15. As such the savings for Technology and People (TAP), reducing the commissioning function in Support Services for Education (SSE) and a number of Home to SEND transport savings have been reversed.

3.2.16. The TAP programme was originally intended to be a 5-year programme commencing late in 2016 and due to conclude in 2021 having made workforce related savings of approximately 10% of salary costs (£7.58m) in that time. To date the programme has achieved £600k of directly attributable savings and a further £294k of partially attributable savings

3.2.17. The programme has also significantly contributed to service savings made across the organisation as an enabler for example, reduction in travel expenditure due to the introduction of Skype for Business. Furthermore, a conservative estimate of 600 working hours have been saved daily from faster power up and log speeds further to the introduction of new devices and Windows 10 functionality.

3.2.18. The programme closed before the anticipated end date due to the financial imperative focus which has reviewed future MTFP saving targets and reset the 2019/2020 budget. This resulted in a decision to reabsorb the future years attributed service TAP related savings into an overall organisational target. This decision was based on a confident assumption that the foundation has been laid and tools made available for ongoing technology and people transformation aligned to the organisational redesign which will determine the shape and size of the organisation in the future. Fundamental to delivering ongoing savings and future sustainability will be a focus on the behavioural shifts necessary to change the cultural mindset of the organisation.

**3.3. Other movements:**

**Table 3** below sets out the incremental service movements (savings and adjustments) within Children's Services budgets over the MTFP period followed by an explanation for each.

**Table 3: Other movements by type for Children’s Services**

Type of movement	2019/20 (£m)	2020/21 (£)	2021/22 (£)
In-Year Savings	- 6.979	- 1.476	-
Prior Year Savings	- 2.440	- 1.155	-
<b>Total</b>	<b>- 9.419</b>	<b>- 2.631</b>	<b>-</b>

3.3.1. In Year Savings -£6.979m/-£1.476m/£0.000m

In September 2018 Cabinet agreed £5.033m of MTFP 2 savings in Childrens Services as a result of the in year forecast financial position of the authority. In addition, Peopletoo identified £3.422m of savings as part of a 3 year financial improvement plan.

The 2019/20 value (£6.979m) includes £1.987m of savings already being delivered in 2018/19.

3.3.2. Prior Year Savings -£2.440m/-£1.155m/£0.000m

These savings are for TAP (£1.440m/£0.855m) and Transport (£1.000m/£0.300m). They were put forward without detailed plans in place to achieve them and therefore are reversed in full under the heading “Prior Year Savings Unachievable” above.

**3.4. Indicative Service Budgets:**

After reflecting the movements above, the indicative budgets for the MTFP period (2019-22) are set out in the table below.

**Table 4** Three-year budget for Children’s Services compared to the current 2018/19 budget.

Service	2018/19 Budget £m	2019/20 Indicative Budget £m	2020/21 Indicative Budget £m	2021/22 Indicative Budget £m
Children’s Services	65.895	84.884	84.937	86.376

**3.5. Further Savings Proposals**

The MTFP Strategy report to Cabinet in December 2018, showed that there was a funding shortfall of £15m to produce a balanced budget for 2019/20. Services have developed proposals for further reductions in service budgets that would ensure a balanced budget for 2019/20 and that, in some cases, also contribute to additional savings in 2020/21.

3.5.1. Savings proposals totalling £8,512m are being proposed, of which £1,701m relate to Children’s Services. These proposals are detailed in the table below and all require a saving decision to take effect from 1 April 2019. Of the Children’s Services savings proposals, £926k are ongoing. A summary table of all the

Proposals for Change can be found in Appendix A (Summary of Children's Savings Proposals from 2019/20)

- 3.5.2. For Children's Scrutiny the detailed proforma's for the relevant Proposals for Change for this committee can be found at Appendix B
- 3.5.3. Within the budget for each year is a revenue contingency, which is aimed to provide some resilience in the event that some savings cannot be delivered to the extent planned. It has been assessed, through the use of confidence factors, that the contingency sum is sufficient to address any potential shortfalls to allow for a balanced budget in 2019/20

#### **4. Consultations undertaken**

- 4.1. The savings proposals contained within this report do not require consultations. Within appendix A the proposals and values of savings can be seen

#### **5. Implications**

- 5.1. There are significant financial implications and these are identified throughout the report.
- 5.2. The detailed proposals for change can be seen in appendix B2. These detail any legal implications associated with each change proposal.
- 5.3. The nature and scale of the savings required means that there will be HR implications arising from this report these can be seen within the detailed proposals for change in appendix B2.

#### **6. Background papers**

- 6.1. Revenue Budget 2019/20 and MTFP Strategy Report to Cabinet 19 December 2018

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

## Appendix A: Summary of Children's Savings Proposals from 2019/20

Service	Proposals for Decision				Proposals requiring consultation				TOTALS for Proposals for Decision and Proposals Requiring Consultation			
	No. Proposals for Change	Max 19/20	..of which is ongoing savings	<u>Additional</u> ongoing savings from 20/21	No. Proposals for change	Max 19/20	..of which is ongoing savings	<u>Additional</u> ongoing savings from 20/21	No. Proposals for change	Max 19/20	..of which is ongoing savings	<u>Additional</u> ongoing savings from 20/21
Children's Services	6	1701.0	925.7	0.0	0	0.0	0.0	0.0	6	1701.0	925.7	0.0
<b>TOTALS</b>	<b>6</b>	<b>1701.0</b>	<b>925.7</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>6</b>	<b>1701.0</b>	<b>925.7</b>	<b>0.0</b>





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## Appendix B1 - Summary of Savings Proposals for 2019 – 2022 for Policies, Children & Families Scrutiny

Service Area Ref.	Proposal Title	Brief Summary	Sum of Max Value 2019/20 Saving (£,000)	Sum of Max Value 2020/21 Saving (£,000)
<b>Children's – For decision</b>				
Chil1920-01	<b>Support for School Improvement</b>	To use the School Improvement Monitoring and Brokering Grant to fund the salaries of the Primary School Improvement Advisers currently funded by the LA.	220.4	0
Chil1920-02	<b>Reduction in support for Early Years capital programmes</b>	Reduction in staffing capacity supporting EY capital programmes as a result of reduced capital programme for 19/20.	13.6	0
Chil1920-03	<b>CSC realignment savings</b>	Proposed realignment of social work services within the county around an east-west split.	573.4	0
Chil1920-04	<b>Children's Staffing Vacancies</b>	Hold a number of positions we have been unable to recruit to as vacant positions for one year.	775.3	-775.3
Chil1920-05	<b>Early Years Entitlements</b>	Changes to processing of payments of the Early Years Entitlement and funding for 2 year olds including the extended entitlement paid to EY providers.	20	0
Chil1920-06	<b>SEN transport</b>	Reducing the cost of providing transport to specialist provision.	98.325	0

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**Appendix B2 –  
Children’s Services  
Proposals for  
Change –  
For decision for 2019  
– 2022**

## Proposal for Change:

### Chil1920-01 Support for School Improvement

Corporate Plan Priority:	
Service Area:	Education
Director:	Julian Wooster
Strategic Manager	Dave Farrow
SAP Node	

1. The proposal is to:	
	<b>Managing Demand</b> - <i>Examine what can be done to influence our demand and reduce service pressures/costs or increase income, including raising fees and charging for services. How could we work across the wider local system with partners, are we picking up costs that should be paid by a different part of the system? Evidence of current and expected future demand will be required as part of future planning.</i>
	<b>Increasing Productivity</b> - <i>Since 2011/12 the Council has made most of its savings through efficiency measures. Like most Councils there is now less scope for traditional efficiency savings. What efficiency/productivity savings are available? What are the biggest expenditure items in your service? Are we getting best value from our contracts? Are we exploring opportunities to negotiate?</i>
x	<b>Service Delivery Models</b> - <i>Are you aware of any alternative delivery models that could deliver services differently? What examples from other authorities could we adopt? E.g. commission from another party, joint venture... recognising that some options will have a long lead in times and would not necessarily impact on the financial gap in 2018/19.</i>
	<b>Reductions in Services</b> - <i>Are there services which partners could provide instead? Are all your services adding value? Are there any services which could safely and legally be stopped? What would the impact be on residents? Could residents be empowered to do it themselves?</i>

2. Outline of the proposed change:	
<p>To use the School Improvement Monitoring and Brokering Grant (SIM&amp;B) to fund the salaries of the Primary School Improvement Advisers currently funded by the Local Authority (LA).</p> <p>The salary costs are £287,400. This value includes £67,000 savings identified as part Peopletoo's financial improvement plan that are included within a separate proforma, therefore net saving of £220,400.</p>	

2a. Confidence level	
<p>Salary costs of Primary School Improvement Team - 100%</p> <p>This transfers the salary costs of the Primary School Improvement Team from an LA budget to a grant received from the Department for Education (DfE).</p> <p>Should the grant cease these costs will need to be re-stated against an LA budget.</p>	

**3. Impact on residents, businesses and other organisations:**

None

**4. Impact on other services we provide:**

None

**5. Impact on staff:**

N/A

**6. Resources and support needed to make the change:**

Finance support required to ensure grant is allocated appropriately.

**7. Timescale to deliver and major milestones:**

	Milestone	Date
Grant allocated		1 April 2019

**8. Risks and opportunities:**

The DfE may cease the SIB&M grant in the future, however this would presumably be aligned to a change in LA responsibilities and therefore a cost reduction would also be expected.

**9. Dependencies:**

The grant is calculated annually based on the number of maintained schools in the LA at that time and there is no guarantee that the grant will continue indefinitely. If it ceases and the LA still has maintained schools and the existing statutory responsibilities related to those schools, the LA will need to ensure that funding is available to deliver those responsibilities.

**10. Initial Equality Impact Assessment:**

N/A

**11. Consultation and Communications plan:**

No

**12. Legal Implications:**

No legal implications – the terms of the Grant allow for staffing costs to be covered from it.

**13a. Financial Savings – net change to service budget in each year:**

Are the savings evidenced based (evidence should be included with this template)?	Yes
---	-----

If no, when is the evidence expected?					
Please note: these figures should be cumulative					
£s	Savings	Income Generated	Cost Involved (also see 13b)	Total	Ongoing or One-off?
2019/20	£220,400	£	-£	£220,400	Ongoing
2020/21	£	£	-£	£	
2021/22	£	£	-£	£	
2022/23	£	£	-£	£	
2023/24	£	£	-£	£	
<b>Total</b>	<b>£220,400</b>	<b>£</b>	<b>-£</b>	<b>£220,400</b>	

13b. One-off project costs and income (not included in above):		
£s		
2019/20	Capital Costs	-£
	Capital Receipts	£
	Estimate of Redundancy costs	-£
	Estimate of Resource costs to deliver	-£
	Sub-total	£
2020/21	Capital Costs	-£
	Capital Receipts	£
	Estimate of redundancy costs	-£
	Estimate of resource costs to deliver	-£
	Sub-total	£
2021/22	Capital Costs	-£
	Capital Receipts	£
	Estimate of redundancy costs	-£
	Estimate of resource costs to deliver	-£
	Sub-total	£
<b>TOTAL</b>		<b>£</b>

## Proposal for Change:

### Chil1920-02 Reduction in Early Years Capital Programme Support

Corporate Plan Priority:	
Service Area:	Schools and Early Years Commissioning
Director:	Julian Wooster
Strategic Manager	Dave Farrow
SAP Node	

1. The proposal is to:	
	<b>Managing Demand</b> - <i>Examine what can be done to influence our demand and reduce service pressures/costs or increase income, including raising fees and charging for services. How could we work across the wider local system with partners, are we picking up costs that should be paid by a different part of the system? Evidence of current and expected future demand will be required as part of future planning.</i>
	<b>Increasing Productivity</b> - <i>Since 2011/12 the Council has made most of its savings through efficiency measures. Like most Councils there is now less scope for traditional efficiency savings. What efficiency/productivity savings are available? What are the biggest expenditure items in your service? Are we getting best value from our contracts? Are we exploring opportunities to negotiate?</i>
X	<b>Service Delivery Models</b> - <i>Are you aware of any alternative delivery models that could deliver services differently? What examples from other authorities could we adopt? E.g. commission from another party, joint venture... recognising that some options will have a long lead in times and would not necessarily impact on the financial gap in 2018/19.</i>
X	<b>Reductions in Services</b> - <i>Are there services which partners could provide instead? Are all your services adding value? Are there any services which could safely and legally be stopped? What would the impact be on residents? Could residents be empowered to do it themselves?</i>

2. Outline of the proposed change:	
Reduction in staffing capacity supporting Early Years (EY) capital programmes as a result of reduced capital programme for 2019/20 and potential cessation of capital grants to private providers.	
This reduction is linked to CAF12 Restructure of Early Years Teams developed as part of Medium Term Financial Plan (MTFP) proposals taken to Cabinet in September 2018.	

2a. Confidence level	
100%	£27,200 is 100% of costs but saving depends on level of reduction. £13,600 therefore added as a prudent figure

**3. Impact on residents, businesses and other organisations:**

By ceasing the Early Years Capital Programme there is a risk that there will be some areas of the county that will not have a sufficient number of early years places. This in turn may mean that some parents may not be able to work as childcare may not be available. We will work with private provider organisations to inform them of our needs, so they can develop provision in shortage areas. We will also continue to promote childminding as an opportunity for individuals to set up their own business.

**4. Impact on other services we provide:**

N/A

**5. Impact on staff:**

Proposals would be achieved through review of the staffing structure.

**6. Resources and support needed to make the change:**

HR support will be required to manage any redundancy process

**7. Timescale to deliver and major milestones:**

	Milestone	Date
Where there are shortages of places will seek to increase numbers of childminders, this will form part of an annual review of supply against demand across the county.		31 <sup>st</sup> March 2019
The corporate timescale in relation to staff consultation highlighted will be followed.		

**8. Risks and opportunities:**

There is a risk that SCC may be challenged in relation to not meeting its duty in relation to ensuring an appropriate supply of early years places in an area. There has been no such challenge to date in areas where demand exceeds supply.

There are opportunities for us to work with larger childcare organisations for them to deliver places where they are needed and we will also continue to encourage individuals to become childminders in areas where there is a shortage of places.

Where there are shortages of places will seek to increase numbers of childminders.

**9. Dependencies:**

Dependency on decision in relation to the ceasing of Early Years Capital Programme



**10. Initial Equality Impact Assessment:**

Consideration has been given to the public-sector equality duty and a separate Equalities Impact Assessment has been completed to support this proposal.

**11. Consultation and Communications plan:**

Staff consultation is required.

There will be no public consultation undertaken as part of this proposal.

**12. Legal Implications:**

There is potentially a reduction in service provision (childcare places) therefore statutory duties to ensure an appropriate supply of early years places (under the Childcare Act 2016 and 2006) apply and relevant government guidance will be considered before any reduction occurs. It should be noted that statutory duties will become harder to meet if we are not able to develop provision through capital investment.

In developing this proposal, officers have adhered to statutory guidance on Early Education and Childcare and are satisfied that SCC will continue to be able to ensure sufficiency taking into account the seven factors mentioned in paragraph B1 of the guidance, in particular i) the state of the market and ii) the quality and capacity of childcare providers and childminders in the county.

Consideration has also been given to the public sector equality duty (especially in relation to SEND and vulnerable children).

**13a. Financial Savings – net change to service budget in each year:**

Are the savings evidenced based (evidence should be included with this template)?	Yes
If no, when is the evidence expected?	[Enter date]

Please note: these figures should be cumulative

£s	Savings	Income Generated	Cost Involved (also see 13b)	Total	Ongoing or One-off?
2019/20	£13,600	£	-£	£13,600	Ongoing
2020/21	£	£	-£	£	
2021/22	£	£	-£	£	
2022/23	£	£	-£	£	
2023/24	£	£	-£	£	
<b>Total</b>	<b>£13,600</b>	<b>£</b>	<b>-£</b>	<b>£13,600</b>	

**13b. One-off project costs and income (not included in above):**

£s		
2019/20	Capital Costs	-£
	Capital Receipts	£
	Estimate of Redundancy costs	-£

	Estimate of Resource costs to deliver	-£
	Sub-total	£
2020/21	Capital Costs	-£
	Capital Receipts	£
	Estimate of redundancy costs	-£
	Estimate of resource costs to deliver	-£
	Sub-total	£
2021/22	Capital Costs	-£
	Capital Receipts	£
	Estimate of redundancy costs	-£
	Estimate of resource costs to deliver	-£
	Sub-total	£
	TOTAL	£

# Somerset Equality Impact Assessment

Organisation prepared for	Somerset County Council		
Version	V1.0	Date Completed	
Description of what is being impact assessed			
<p><b>Ceasing of Early Years Capital Programme for 2019/20.</b>                  This impact is being assessed as part of reduction in staffing capacity supporting Early Years (EY) capital programmes as a result of reduced capital programme for 2019/20 and potential cessation of capital grants to private provider.                  The Capital programme supported the delivery of universal early years and childcare places and was not specifically focussed on any protected groups.</p>			
Evidence			
What data/information have you used to assess how this policy/service might impact on protected groups?			
<p>SCC holds details of numbers of children entitled to Early Years funding.</p>			
Who have you consulted with to assess possible impact on protected groups?			
<p>The Capital programme supported the delivery of universal early years and childcare places and was not specifically focussed on any protected groups. The Early Years Capital programme has been ongoing for a number of years but has been reduced significantly over the past few years.</p>			

Analysis of impact on protected groups				
Protected group	Summary of impact	Negative outcome	Neutral outcome	Positive outcome
Age	There is a possible indirect impact on children aged 0-5 years and their families in that the Local Authority may not be able to ensure that there are enough childcare places in some areas of the County.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disability	There is a possible indirect impact on children aged 0-5 years that have a disability and their families in that the Local Authority may not be able to ensure that there are enough childcare places in some areas of the County. This may for example result in private providers not taking the necessary steps to make reasonable adjustments to settings to support disabled children to attend early years settings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gender reassignment	• There are no impacts	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Marriage and civil partnership	• There are no impacts	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pregnancy and maternity	• There are no impacts	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Race and ethnicity	There are potential cost implications as increasing demand for childcare places exceed supply leading to providers increasing costs which could potentially adversely affecting those from BME who are more likely on a lower income.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Religion or belief	• •There are no impacts	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

<b>Sex</b>	• There are potential cost implications for working single parent families, and the likelihood that this is more likely to affect women as they are more likely to be the primary care provider.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Sexual orientation</b>	. • There are no impacts	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Other, e.g. carers, veterans, homeless, low income, rurality/isolation, etc.</b>	There may be an indirect negative impact on low income families as increasing demand for childcare places exceeds supply leading to providers increasing costs, this could result in those on low incomes not being able to access the childcare places to enable them to work.  There could potentially be an impact on those affected by rurality where there may be insufficient strength in the childcare market to generate additional space where required without funding from the local authority.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Negative outcomes action plan</b>				
<b>Action taken/to be taken</b>	<b>Date</b>	<b>Person responsible</b>	<b>How will it be monitored?</b>	<b>Action complete</b>
The LA will monitor the requirements for early years places across the County to identify potential areas of shortfall in sufficiency and inform private provider organisations to seek expressions of interest in developing provision in those areas	31/10/2018	Alison Jeffrey	Through ongoing performance management arrangement and the annual reviews of the Early Years	<input type="checkbox"/>

			and Schools Infrastructure Growth Plan	
The LA will ensure that where it is identified that new building developments will result in the requirement for additional early years provision in an area we will seek to ensure that appropriate Section 106/Community Infrastructure Levy funding is secured to enable the development of the necessary provision	31/10/2018	Alison Jeffrey	Through ongoing performance management arrangements	<input type="checkbox"/>
<b>If negative impacts remain, please provide an explanation below.</b>				
We cannot totally remove the impact that the implementation of this proposal will have on employees but the actions will ensure employees are aware of the support and options available to them.				
<b>Completed by:</b>	<b>Dave Farrow</b>			
<b>Date</b>	<b>21/11/2018</b>			
<b>Signed off by:</b>	<b>Dave Farrow</b>			
<b>Date</b>	<b>21/11/2018</b>			
<b>Equality Lead/Manager sign off date:</b>	<b>Tom Rutland 04/12</b>			
<b>To be reviewed by: (officer name)</b>				
<b>Review date:</b>				

## Proposal for Change: Chil1920-03 CSC realignment savings

Corporate Plan Priority:	
Service Area:	Children's Services
Director:	Julian Wooster
Strategic Manager	Paul Shallcross
SAP Node	

1. The proposal is to:	
	<b>Managing Demand</b> - <i>Examine what can be done to influence our demand and reduce service pressures/costs or increase income, including raising fees and charging for services. How could we work across the wider local system with partners, are we picking up costs that should be paid by a different part of the system? Evidence of current and expected future demand will be required as part of future planning.</i>
	<b>Increasing Productivity</b> - <i>Since 2011/12 the Council has made most of its savings through efficiency measures. Like most Councils there is now less scope for traditional efficiency savings. What efficiency/productivity savings are available? What are the biggest expenditure items in your service? Are we getting best value from our contracts? Are we exploring opportunities to negotiate?</i>
X	<b>Service Delivery Models</b> - <i>Are you aware of any alternative delivery models that could deliver services differently? What examples from other authorities could we adopt? E.g. commission from another party, joint venture... recognising that some options will have a long lead in times and would not necessarily impact on the financial gap in 2018/19.</i>
	<b>Reductions in Services</b> - <i>Are there services which partners could provide instead? Are all your services adding value? Are there any services which could safely and legally be stopped? What would the impact be on residents? Could residents be empowered to do it themselves?</i>

2. Outline of the proposed change:
The proposal aims to re-align social work services within the county around an East / West split, with the aim of improving the quality of practice, supporting the journey to a 'Good' Ofsted rating and realising year on year savings in the region of 500k.

2a. Confidence level
90%
A significant proportion of the savings stem from deleting posts which are not currently recruited to. The remainder of the proposed savings have been thoroughly scrutinised by the Children's Social Care Senior Management Team and are felt to be robust and achievable with no impact on service provision.

3. Impact on residents, businesses and other organisations:
The proposal is aimed to improve the efficiency of the provision of Social Work services and as such will benefit the users of these services. Bringing the East and West of the county under the management of one Strategic Manager will improve the flow of work between community and Children Looked After (CLA) services and will support relationship-based practice with children and families.
Multi-agency partners within Somerset will not be negatively impacted by the proposed changes

**4. Impact on other services we provide:**

None identified.

**5. Impact on staff:**

A number of posts will be deleted from the service and as such this will impact on a number of staff members.

Within the total number of posts lost, 5 are not currently filled

*The number of FTE that might be lost is:*   
*The number of posts that might be lost is:*

**6. Resources and support needed to make the change:**

Support will be needed from HR and finance in implementing the proposal and managing consultation processes.

**7. Timescale to deliver and major milestones:**

	Milestone	Date
	New structure to be in place by	01/04/2019

**8. Risks and opportunities:**

Risks – uncertainty around the proposal may cause short term anxiety and worry amongst the existing management group. This may result in managers leaving the organisation.

Deletion of the Next Steps Team Manager post may impact on the capacity of the organisation to recruit to Newly Qualified Social Workers (NQSW) posts in the future. This is mitigated by an increase in the number of Consultant Social Worker (CSWs) for NQSWs

Opportunities – the re-aligned structure will support more effective and efficient working across areas and reduce ‘silo’ working. The new structure will also support future work which will look to reduce the number of transitions for children and families within the system, supporting the development of relationship-based practice.

**9. Dependencies:**

None identified.

**10. Initial Equality Impact Assessment:**

No – as the proposal does not affect service delivery, an equality impact assessment is not required.



**11. Consultation and Communications plan:**

Yes – a 45-day staff consultation is planned to take place prior to the end of December 2018.

Communications will take place via the usual internal channels and via 1:1 meetings with affected staff.

**12. Legal Implications:**

In developing this proposal officers are satisfied that the effect of this proposal will not cause the Local Authority (LA) to fail to meet its statutory duties to ensure and promote children's safety and welfare. Any legal implications of proposed staffing changes will be identified and addressed within the HR business case.

**13a. Financial Savings – net change to service budget in each year:**

Are the savings evidenced based (evidence should be included with this template)? Yes - salaries

If no, when is the evidence expected?

Please note: these figures should be cumulative

£s	Savings	Income Generated	Cost Involved (also see 13b)	Total	Ongoing or One-off?
2019/20	£573,400	£	-£	£573,400	Ongoing
2020/21	£	£	-£	£	
2021/22	£	£	-£	£	
2022/23	£	£	-£	£	
2023/24	£	£	-£	£	
<b>Total</b>	<b>£573,400</b>	<b>£</b>	<b>-£</b>	<b>£573,400</b>	

**13b. One-off project costs and income (not included in above):**

£s		
2019/20	Capital Costs	-£
	Capital Receipts	£
	Estimate of Redundancy costs	-£
	Estimate of Resource costs to deliver	-£
	Sub-total	£
2020/21	Capital Costs	-£
	Capital Receipts	£
	Estimate of redundancy costs	-£
	Estimate of resource costs to deliver	-£
	Sub-total	£
2021/22	Capital Costs	-£
	Capital Receipts	£
	Estimate of redundancy costs	-£
	Estimate of resource costs to deliver	-£
	Sub-total	£
<b>TOTAL</b>		<b>£</b>

## Proposal for Change: Chil1920-04 Children's Staffing Vacancies

Corporate Plan Priority:	
Service Area:	Children's Services
Director:	Julian Wooster
Assistant Director	Claire Winter
SAP Node	

1. The proposal is to:	
	<b>Managing Demand</b> - <i>Examine what can be done to influence our demand and reduce service pressures/costs or increase income, including raising fees and charging for services. How could we work across the wider local system with partners, are we picking up costs that should be paid by a different part of the system? Evidence of current and expected future demand will be required as part of future planning.</i>
	<b>Increasing Productivity</b> - <i>Since 2011/12 the Council has made most of its savings through efficiency measures. Like most Councils there is now less scope for traditional efficiency savings. What efficiency/productivity savings are available? What are the biggest expenditure items in your service? Are we getting best value from our contracts? Are we exploring opportunities to negotiate?</i>
X	<b>Service Delivery Models</b> - <i>Are you aware of any alternative delivery models that could deliver services differently? What examples from other authorities could we adopt? E.g. commission from another party, joint venture... recognising that some options will have a long lead in times and would not necessarily impact on the financial gap in 2018/19.</i>
	<b>Reductions in Services</b> - <i>Are there services which partners could provide instead? Are all your services adding value? Are there any services which could safely and legally be stopped? What would the impact be on residents? Could residents be empowered to do it themselves?</i>

2. Outline of the proposed change:	
<p>The proposal is for a one year saving (2019/20) of £775,300 in social work staffing costs.</p> <p>Recruitment of permanent social workers remains a challenge with 47 vacancies across Children's Social Care currently. A number of posts have been vacant with neither permanent or locum staff filling them for over 12 months. This proposal equates to not recruiting to a number of these vacant posts.</p>	

2a. Confidence level	
	<p>90%</p> <p>Case numbers continue to reduce slowly, and further partnership work may reduce this further.</p> <p>There is a risk that case numbers will increase unexpectedly. Were this to occur it is likely that locum social workers would need to be recruited at higher cost for a period while longer term trends and impacts are assessed.</p>

**3. Impact on residents, businesses and other organisations:**

Communities and partners can be empowered to support families at an early stage reducing the need for specialist social work services. This is current practice but is slow to develop effectively with some partners struggling to understand their early help role.

**4. Impact on other services we provide:**

No.

**5. Impact on staff:**

No staff impact as these are vacant posts and the proposal is for a one year saving only.

**6. Resources and support needed to make the change:**

None

**7. Timescale to deliver and major milestones:**

Milestone	Date
No milestones as plan is to reduce budget for one year – full year effect - from vacant posts	

**8. Risks and opportunities:**

Risks – that social work referrals increase unexpectedly, and current FTE cannot cope with demand, leaving children potentially at risk.

Opportunities – to work with partners and communities to enable them to identify concerns early and address them locally.

**9. Dependencies:**

**10. Initial Equality Impact Assessment:**

No

**11. Consultation and Communications plan:**

No.

**12. Legal Implications:**

In developing this proposal officers are satisfied that the effect of this proposal will not cause the Local Authority (LA) to fail to meet its statutory duties to ensure and promote children's safety and welfare.

**13a. Financial Savings – net change to service budget in each year:**

Are the savings evidenced based (evidence should be included with this template)?	Yes
If no, when is the evidence expected?	

Please note: these figures should be cumulative

£s	Savings	Income Generated	Cost Involved (also see 13b)	Total	Ongoing or One-off?
2019/20	£775,300	£	-£	£775,300	One-off
2020/21	-£775,300	£	-£	-£775,300	
2021/22	£	£	-£	£	
2022/23	£	£	-£	£	
2023/24	£	£	-£	£	
<b>Total</b>	<b>£775,300</b>	<b>£</b>	<b>-£</b>	<b>£775,300</b>	

<b>13b. One-off project costs and income (not included in above):</b>		
£s		
2019/20	Capital Costs	-£
	Capital Receipts	£
	Estimate of Redundancy costs	-£
	Estimate of Resource costs to deliver	-£
	Sub-total	£
2020/21	Capital Costs	-£
	Capital Receipts	£
	Estimate of redundancy costs	-£
	Estimate of resource costs to deliver	-£
	Sub-total	£
2021/22	Capital Costs	-£
	Capital Receipts	£
	Estimate of redundancy costs	-£
	Estimate of resource costs to deliver	-£
	Sub-total	£
<b>TOTAL</b>		<b>£</b>

## Proposal for Change: Chil1920-05 Early Years Entitlements

Corporate Plan Priority:	Chil1920-05
Service Area:	Inclusion Group
Director:	Annette Perrington
Strategic Manager	Phil Curd
SAP Node	

1. The proposal is to:	
	<b>Managing Demand</b> - <i>Examine what can be done to influence our demand and reduce service pressures/costs or increase income, including raising fees and charging for services. How could we work across the wider local system with partners, are we picking up costs that should be paid by a different part of the system? Evidence of current and expected future demand will be required as part of future planning.</i>
	<b>Increasing Productivity</b> - <i>Since 2011/12 the Council has made most of its savings through efficiency measures. Like most Councils there is now less scope for traditional efficiency savings. What efficiency/productivity savings are available? What are the biggest expenditure items in your service? Are we getting best value from our contracts? Are we exploring opportunities to negotiate?</i>
	<b>Service Delivery Models</b> - <i>Are you aware of any alternative delivery models that could deliver services differently? What examples from other authorities could we adopt? E.g. commission from another party, joint venture... recognising that some options will have a long lead in times and would not necessarily impact on the financial gap in 2018/19.</i>
X	<b>Reductions in Services</b> - <i>Are there services which partners could provide instead? Are all your services adding value? Are there any services which could safely and legally be stopped? What would the impact be on residents? Could residents be empowered to do it themselves?</i>

2. Outline of the proposed change:	
<p>The proposed change is in relation to the processing of payments of the Early Years entitlement and funding for 2 years olds including the extended entitlement paid to early years providers. The saving will come from the reduction of a single post.</p> <p>Currently, the Admissions and Entitlements Team process estimates (paying 90% of each claim) to early years providers followed by actual forms which pay the remainder and adjustments which capture any changes (starters and leavers) for early years providers. The adjustments process is non-statutory and many other Local Authorities (LA) do not operate the opportunity for adjustments. The payment process as outlined runs for 3 funding periods in a year. The LA is paid based on the Early Years census in January so is not funded for children accessing the entitlement post census.</p> <p>Adjustments are paid in arrears therefore to cease this support by the end of March 2019 Early Years settings would need to be notified of the change by Christmas.</p> <p>Recognising that removing this will provide a challenge to providers it is proposed that a request is taken to Schools Forum Early Years subgroup in January 2019 seeking funding to support a post at the cost of approximately £20,000 from April</p>	

2019-March 2020 to limit disruption to Early Years settings from the ceasing of this activity. It is expected that School Forum will support this request.

Assuming School forum agree to fund this post until March 2020 the proposal would subsequently remove the post from 1<sup>st</sup> April 2020 therefore, making it an ongoing saving.

The saving, to include salary and on costs is approximately is £20,000.

Other advantages include:

- The settings should get a higher hourly rate as we will not be paying for hours the LA has not been paid for;
- Statistical information will be available by the time the term finishes rather than currently when the earliest it is available is the following half term; this will aid finance colleagues;
- We will not have the high volume of data issues that Core Data/Entitlements/Application Support need to resolve because claims are being submitted after a child has left the setting. This would save the LA time and data on Capita will be more accurate;
- It will save Core Data time as they will not have to clear suspense from the Adjustments;
- Entitlements team can request claim information earlier which means they should be able to complete Early Years census by the deadline without having to work the significant number of additional hours they do currently for census.

#### **2a. Confidence level**

75%

Confidence level reduced due to reliance on School Forum. If School Forum reject this proposal the removal of the post will take place from July 2019.

#### **3. Impact on residents, businesses and other organisations:**

Disadvantages for Early Years providers and parents from removing this post immediately are outlined below;

1. By funding this role for 12 months Schools Forum will be able to support SCC in minimising the disruption from these changes
2. It would remove the flexibility that allows parents to move settings part way through a term;
3. Funded 2 years who are awarded funding part way through the term will probably have to wait to access a space until the start of the following term;
4. If settings don't send in the appropriate documentation with their claim/claim appropriately/complete a 30 hours check, there will be no opportunity for them to claim later using an adjustment form therefore they will not be paid. This has the potential for more complaints and could potentially lead to sustainability issues/closures of settings. However, it is settings responsibility to comply with the requirements of Provider agreement and they are sent clear instructions by the team in advance so there should be no reason for settings to lose money;
5. When children overclaim at multiple settings neither provider will be able to amend their claim (on the summer actual claim, there were nearly 200 children

that overclaimed their hours); there is no action that can be taken to mitigate against this.

- Settings will need support to amend their policies to reflect the change. The Entitlements and Early Years Team will continue to support settings as capacity allows.

**4. Impact on other services we provide:**

As above. Once the post is permanently removed in April 2020 there will be a reduction in work for the Core Data Team.

**5. Impact on staff:**

Proposals would be achieved through review of the staffing structure.

**6. Resources and support needed to make the change:**

It is likely that support will be required from HR around any staffing changes required.

**7. Timescale to deliver and major milestones**

	Milestone	Date
	Inform Early Year settings	By end of Autumn Term 2018 or by March 2019
	Schools Forum Decision to fund role for 1 year	16 January 2019

**8. Risks and opportunities:**

The risks for 1 & 2: The Local Authority has a statutory duty to secure a free place offering 570 hours a year over no fewer than 38 weeks of the year for all 3 & 4 year olds, including new starters and eligible 2 year olds. Families of eligible 2 year olds are the most economically disadvantaged in Somerset.

Recognising this the proposal is for Early Years sub group to extend the processing of adjustments for another financial year by agreeing to fund a post from their current DSG surplus

**9. Dependencies:**

No dependencies

**10. Initial Equality Impact Assessment:**

Agreement with the Corporate Equalities Manager that an Equalities Impact Assessment is not required.

**11. Consultation and Communications plan:**

There is no legal requirement to consult with Early Year providers however the team will communicate the change as soon as possible, providing advice and guidance immediately and on an ongoing basis.

Assuming the Early Year subgroup agrees to fund the post for another year, it will give the team chance to review processes properly and prepare settings for the change which could include organised events.

**12. Legal Implications:**

Under the Childcare Act (2006), SCC has a duty to secure sufficient childcare places for working parents (s6) and to secure early years provision free of charge (s7). The potential impact on SCC's ability to meet this duty must therefore be considered.

The statutory guidance states that SCC **should** ensure that providers are treated in an equitable way and that the proper use of funding does not place undue administrative burdens on them. SCC **should** be mindful of the concerns of smaller providers (re. their cashflow) when making decisions about payment methods. SCC **should** regularly review how they pay providers to ensure that it continues to meet the needs of all providers in their area. **As far as reasonably practicable**, SCC **should** ensure that eligible children who move into the area are able to take up their place at any time. SCC are not required to secure additional free hours (extended entitlement) where the parent has applied after the set deadlines.

SCC **must** be clear with providers on their policy in relation to how a child will be funded if they take up their place outside of any regular headcount or if they choose to change providers during the term. SCC **should** encourage providers to work together in this regard. Consideration should therefore be given to these requirements when amending the Provider Agreement and steps must be taken to ensure that the changes are clearly communicated.

The Provider Agreement will need to be amended in line with the above. The Agreement cannot be amended unilaterally (unless to reflect legislative changes). Any changes will therefore need to be made to the 2019-2020 Agreement before any Providers sign up for the 2019-2020 entitlement.

**13a. Financial Savings – net change to service budget in each year:**

Are the savings evidenced based (evidence should be included with this template)?	Yes
If no, when is the evidence expected?	N/A

Please note: these figures should be cumulative

£s	Savings	Income Generated	Cost Involved (also see 13b)	Total	Ongoing or One-off?
2019/20	£20,000	£	-£	£20,000	Ongoing
2020/21	£	£	-£	£	
2021/22	£	£	-£	£	
2022/23	£	£	-£	£	
2023/24	£	£	-£	£	
<b>Total</b>	<b>£20,000</b>	<b>£</b>	<b>-£</b>	<b>£20,000</b>	<b>Ongoing</b>

**13b. One-off project costs and income (not included in above):**

£s		
2019/20	Capital Costs	-£
	Capital Receipts	£
	Estimate of Redundancy costs	-£



	Estimate of Resource costs to deliver	-£
	Sub-total	£
2020/21	Capital Costs	-£
	Capital Receipts	£
	Estimate of redundancy costs	-£
	Estimate of resource costs to deliver	-£
	Sub-total	£
2021/22	Capital Costs	-£
	Capital Receipts	£
	Estimate of redundancy costs	-£
	Estimate of resource costs to deliver	-£
	Sub-total	£
	TOTAL	£

## Proposal for Change:

### Chil1920-06 Reduce the cost of providing transport to specialist provision

Corporate Plan Priority:	Childrens 1920 – 06 (CAF 10b)
Service Area:	Inclusion – School Transport
Director:	Julian Wooster
Strategic Manager	Annette Perrington
SAP Node	

1. The proposal is to:	
√	<b>Managing Demand</b> - <i>Examine what can be done to influence our demand and reduce service pressures/costs or increase income, including raising fees and charging for services. How could we work across the wider local system with partners, are we picking up costs that should be paid by a different part of the system? Evidence of current and expected future demand will be required as part of future planning.</i>
√	<b>Increasing Productivity</b> - <i>Since 2011/12 the Council has made most of its savings through efficiency measures. Like most Councils there is now less scope for traditional efficiency savings. What efficiency/productivity savings are available? What are the biggest expenditure items in your service? Are we getting best value from our contracts? Are we exploring opportunities to negotiate?</i>
√	<b>Service Delivery Models</b> - <i>Are you aware of any alternative delivery models that could deliver services differently? What examples from other authorities could we adopt? E.g. commission from another party, joint venture... recognising that some options will have a long lead in times and would not necessarily impact on the financial gap in 2018/19.</i>
√	<b>Reductions in Services</b> - <i>Are there services which partners could provide instead? Are all your services adding value? Are there any services which could safely and legally be stopped? What would the impact be on residents? Could residents be empowered to do it themselves?</i>

2. Outline of the proposed change:
<p>Building on the 18/19 proposal (CAF 10a) this proposal coordinates the activity which links the strategic Capital investment programme to children and young people attending their nearest appropriate specialist resource base, school / college. Children and young people attending specialist resource base or special school provision all have an education, Health and Care plan (EHCP)</p> <p>The Children and Families Act 2014 requires the Local Authority (LA) to consider any school provision requested by parents. This is known as parental preference. The Local Authority will also consider the nearest appropriate provision. Final decisions are determined on individual circumstances which take into account the appropriateness of the school / setting to meet the child's SEND (Special Educational Needs and Disabilities) needs and the most efficient use of resources. The final decisions must be named in the EHCP and once named this is legally binding upon both the LA and School setting. Before a school can be named the LA must consult with a school and consider any responses. The LA can in most cases overrule the school / setting where they are in receipt of state funding. The LA can also disagree with the parent and name a school/ setting of LA choice, however this could be subject to further challenge via Tribunal, which in turn could</p>

have further financial implications on the High Needs and Local Authority travel budgets. In order to ensure efficient use of resources case workers should take into account travel time, distance and cost. Children and young people have an annual review of their Education, health and Care plan. This will also apply to all new EHCP's.

Key stage transfers occur nationally at the end of Year 6, end of Year 11. These transitions should be undertaken in the year proceeding transfer to support effective and successful transfer to a new school with parents/ carers and young people at the point of their annual review. Such points of transition provide an opportunity for existing school placements and travel arrangements to be reviewed and for savings to be made where previous school placements may not be the nearest appropriate.

In line with National trend the demand for places in specialist provision continues to increase. This is exacerbated by the Children and Families Act 2014, which increased the age up to which young people with SEND may have an EHCP to 25. Children and young people can also attend local mainstream schools and colleges, where children and young people are over statutory walking distances where a school has been named in their EHCP this also requires consideration of travel eligibility and the same criteria as above apply.

Children and Young People who need specialist provision often must travel to receive this, and where this isn't available or of a good quality parents will often request specialist independent provision. To offset demand a large capital investment programme has been implemented in Somerset since 2016 to make sure that children and young people are placed as close to home as possible. Work is underway to mitigate this increase by ensuring there is sufficient capacity to meet needs locally and ensuring information, advice and guidance and SEND casework is robust and effectively manages parental expectation from an early stage. In addition to this, Somerset County Council has adopted the use of (personal Travel Payments (PTPs)). These are offered to all parents of children that would otherwise have to be transported individually in a taxi.

Additional risks include market variances and whilst we are making best use of internal fleets but remain vulnerable to the commercial market, where costs have risen sharply in recent years. Under this proposal we intend to limit our call on the market for the number of individual journeys we require. This can be supported by placing children in their nearest appropriate provision, so they can be transported in groups.

This is a statutory duty and must be fulfilled. The policy has been revised to reduce the offer to a statutory minimum.

Key aspects of the proposal to achieve the identified saving are as follows. Improvements in practice will lead to outcomes 1 and 2 below, and the increase in capacity will lead to SEND placements being made more locally with a corresponding reduction in costs:

1. Cost avoidance through SEND Placements – moving 25% of the cohort of children identified as relevant for this proposal to schools closer to their homes address.
2. Improvement in case work through challenge provided at panels.
3. Developing capacity in special schools from September 2019 resulting in 25 new starts.

**2a. Confidence level**

75%

Each case must be considered on individual circumstances and in conjunction with the young person and parent/ carers. In some circumstances such a change may be difficult to achieve. Risks include parental resistance and challenge, delayed building programmes and impact upon multiple travel opportunities.

**3. Impact on residents, businesses and other organisations:**

This would impact on children and parent/carers where they are not attending their nearest appropriate school and where transition is required. However, as the service user has the option to decline a change then there is no impact unless the local authority disagrees, which carries the additional risk of appeal.

**4. Impact on other services we provide:**

This change is an improvement on current working practices only.

**5. Impact on staff:**

N/A

**6. Resources and support needed to make the change:**

This work will require coordination between the SEND Casework Team and officers in Transporting Somerset. This change to existing working practices has begun but requires continued monitoring and nurturing to ensure these relationships are robust and effective.

**7. Timescale to deliver and major milestones:**

Identify all children that could be moved to provision closer to home	Already undertaken
Identify the next suitable transition point for those children	Ongoing
Commence relocation conversations during the next available appropriate annual review	Ongoing
Move children to the nearest appropriate provision	Ongoing

**8. Risks and opportunities:**

There is a risk of reputational damage to the LA and additional challenge where children and young people and / or their parents differ in their views of the most appropriate specialist provision.

Where such challenges proceed to the possibility of a tribunal, the LA will have to consider further each case as determined by case law precedence.

**9. Dependencies:**

This proposal is dependent upon Ofsted inspections of special schools, where any special school which moves into a category is likely to impact upon parental confidence for their child to attend

**10. Initial Equality Impact Assessment:**

All children identified will be considered to have a disability under the 2010 Equality Act. Some parents may also have disabilities under the Equality Act and should have reasonable adjustments considered as part of individual circumstances.

**11. Consultation and Communications plan:**

All conversations would be undertaken on a case by case basis. There is no need for any public consultation exercise.

**12. Legal Implications:**

Any SEND Casework activity will have to be undertaken in accordance with the relevant Code of Practice. The risk relating to tribunal have been outlined in sections 2a and 8.

**13a. Financial Implications – net change to service budget in each year:**

Are the savings evidenced based?				Yes	
If no, when is evidence expected?					
Please note: these figures should be cumulative (as per the approach for MTFP and savings)					
£s	Savings	Income	Growth/Costs	Total	Ongoing or One-off?
2019/20	£98,325	£	-£	£98,325	ongoing
2020/21	£	£	-£	£	
2021/22	£	£	-£	£	
Total	£98,325	£	-£	£98,325	

**13b. One off project costs and income (not included in above):**

£s		
2018/19	Capital Costs	-£
	Capital Receipts	£

	Estimate of redundancy costs	-£
	Estimate of resource costs to deliver	-£
	Sub-total	£
<i>2019/20</i>	Capital Costs	-£
	Capital Receipts	£
	Estimate of redundancy costs	-£
	Estimate of resource costs to deliver	-£
	Sub-total	£
<i>2020/21</i>	Capital Costs	-£
	Capital Receipts	£
	Estimate of redundancy costs	-£
	Estimate of resource costs to deliver	-£
	Sub-total	£
	TOTAL	£



Somerset Safeguarding  
**Children Board**



# Somerset Safeguarding Children Board Annual Report 2017/18

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# 1. Foreword by the Independent Chair

I am pleased to introduce this annual report for Somerset Safeguarding Children Board covering the year 2017-18. This is a public report which sets out the work of the Board and gives a view of the effectiveness of safeguarding arrangements across the county. The report aims to give everyone who lives and works in Somerset a sense of how well local services and people in the community are working together to keep children safe.

As in previous years, many of the organisations which contribute to the Board's work have continued to face significant financial pressures, which have entailed difficult decisions about allocation of resources. Some have also faced significant workforce challenges at both leadership and practitioner levels, which at times has had an impact on their ability to maintain consistency and quality of services. Despite the pressures, the Board's partners have maintained a focus on developing arrangements and services which enable a quicker, earlier response to children and families who may need additional help. This is to be welcomed, and will be of continued interest to the Board in the coming year.

As previously, agencies have continued to work together in support of the vision of the Children's Trust, focusing attention on areas which present the greatest risk to Somerset's children - child sexual exploitation and going missing, neglect

and domestic abuse – and working more closely with other multi-agency partnerships to ensure that the most vulnerable individuals and families are identified, supported and safeguarded. As understanding increases, so efforts can be made those areas still in need of improvement. This will include, in the coming year, attention being paid to other areas of exploitation which are now becoming more evident, as well as a particular focus on children with disabilities, who can be particularly vulnerable.

The coming year will require key partners –the Council, Avon and Somerset Police and Somerset Clinical Commissioning Group – to review their arrangements for safeguarding children in response to the changed legislative context that has been introduced by the Children and Social Work Act 2017. This gives greater flexibility locally whilst increasing accountability for NHS and police partners alongside the local authority, and is an opportunity to think differently about how best to safeguard children in Somerset. Plans will be published and consulted upon by summer 2019, in readiness for implementation by October 2019.

The children's workforce – professionals, volunteers and others – are the bedrock of safeguarding arrangements, whatever the legislative context. Every day they work to support families and keep children safe. I have been inspired by the dedication and commitment of all those I have met during the course of the year and thank them all for their hard work and dedication.

**Sally Halls**

## 2. Executive Summary

This report sets out how Somerset Safeguarding Children Board (SSCB) has worked during 2017/2018 to meet its statutory objectives, which are to co-ordinate local work to safeguard and promote the welfare of children and young people, and to ensure the effectiveness of that work.

Overall, SSCB partners have continued to work together improve their safeguarding arrangements amidst a changing national context for safeguarding, reduced leadership capacity and shrinking resources. The response to challenges within individual agencies has had sometimes had an impact across the partnership, resulting in – at times – challenging conversations between partners and at the Board.

Partners have strengthened their response to children and young people, including providing help and support earlier, but more needs to be done to ensure that service responses are consistent in quality and timeliness, and effective in their impact on the safety and wellbeing of children. Key to this will be listening and responding more systematically to what children and their families are saying works for them.

Midway through the year, Ofsted also reported as follows:

*Since the last inspection in 2015, when Somerset children's services were judged as inadequate overall, the local*

*authority has made steady progress in improving the quality of services that children and young people receive. Senior leaders have worked effectively with an improvement partner, and they have created a culture of openness and willingness to learn that supports further improvement.*

By way of context, the report gives information about children and families in Somerset which shows that, despite the relative affluence of the county, too many children are living in poverty. It also gives a snapshot of the levels of child protection and other activities aimed at helping families at the right time and promoting the wellbeing of their children.

During the year, SSCB has focused on five priority areas:

- 1) Early Help
- 2) Multi-agency Safeguarding
- 3) Neglect
- 4) Child Exploitation (CE) / Children Missing
- 5) Strong Leadership and Strong Partnership

The report gives details about what was done in relation to these, and what impact there has been to date. It also describes and evaluates other aspects of the Board's work, in relation to such activities as the provision of multi-agency training, private fostering, and managing allegations against people in positions of trust.

In relation to **early help**, SSCB has focused on the importance of children and families receiving good quality and timely multi-agency help to keep children safe and promote their wellbeing. Good progress has been made, and there is

a good level of engagement across many partners. However, there is still much to do to achieve a timely, consistent, good quality response to families in need of help, informed by the views of children and families, supported by a clear understanding and application of thresholds for services by professionals, and with demonstrable impact. The Board will continue with its focus on this priority in the forthcoming year.

The partnership closely monitored the effectiveness of **multi-agency work to safeguard children**. While practice has improved significantly, audits and scrutiny of performance has indicated areas where more needs to be done to improve the quality and consistency of partners' contribution to multi-agency plans that safeguard children and reduce risks to their safety and wellbeing.

**Neglect** was identified as a priority because of the serious impact it can have on the long-term chances for children. Although it commonly occurs in the context of poverty and other aspects of social disadvantage, neglect can affect children in any social context. In Somerset, as in all four countries of the UK, neglect is the most common reason for a child to be subject of a child protection plan, so understanding its repercussions and the potential for both prevention and intervention is vital. SSCB accordingly wanted to be sure that children who are experiencing or at risk of neglect are identified and safeguarded. Whilst good progress has been made, further work is required to ensure that neglect is promptly and effectively identified, understood and addressed. The publication of a serious case review (SCR)

during 2018-19 about the impact of long term neglect on a number of children will provide additional impetus to the Board's continuing focus in this area.

**Child exploitation and children missing** was SSCB's fourth priority area during the year, with the Board seeking assurance that children who are at risk of, or subject to, all forms of exploitation and abuse (including children missing from home, care or education) are identified and safeguarded (to include CSE, trafficking, county lines modern slavery). Since the publication of the SCR 'Fenestra', the Board has worked on improvements aimed at getting the system right for children at risk of or experiencing CSE. Pleasingly, Ofsted reported (January 2018) seeing effective multi-agency action to safeguard children at high risk of CSE, but noted that more needed to be done by the partnership to improve responses to children who go missing.

An important function of LSCBs is to undertake case reviews. SSCB published two serious case reviews (SCRs) in 2017/18. A third was initiated, which will be published later in 2018.

Details of these and other types of reviews undertaken by the Board during the year are included.

The SSCB is responsible for **leading the multi-agency safeguarding agenda** and developing robust arrangements to co-ordinate and ensure the effectiveness of how children and young people are safeguarded in Somerset. It has

continued as a partnership to improve its effectiveness, against a backdrop of reduced capacity across the partnership. Pleasingly, when Ofsted re-inspected the Local Authority's children's services in November 2017, it noted improvements in how children are safeguarded, particularly with regard to child sexual exploitation and the provision of Early Help services, which were judged as becoming more embedded across Somerset.

Looking to the future, as well as continuing work to improve the quality and effectiveness of multi-agency working to safeguard children, 2018-19 will also see preparations being made to design and implement the new safeguarding arrangements heralded by the Children and Social Work Act 2017. Somerset County Council, Avon and Somerset Police and Somerset Clinical Commissioning Group have responsibility for leading this, working with partners across and beyond Somerset. Details will be reported in the next Annual Report, which will be the final report from SSCB in its current form.



### 3. About this report

This report sets out how Somerset Safeguarding Children Board (SSCB) has worked during 2017/2018 to meet its statutory objectives, which are to co-ordinate local work to safeguard and promote the welfare of children and young people, and to ensure the effectiveness of that work.

The report provides an assessment of the performance and effectiveness of local services. It identifies areas for improvement, and the actions being taken to address them. It also gives detail on the priority areas addressed by the Board during this period, as well as the data and reporting provided by partner agencies regarding their performance in working together to safeguard children and young people in Somerset.

The report includes:

- Lessons learned from reviews undertaken during the year and how SSCB has used the learning to improve practice;
- The financial contribution of each partner agency and how that money is spent;
- The Board's planned priority areas for 2018-19.

The SSCB Annual Report for 2017/18 has been sent to:

- The Leader and Chief Executive of Somerset County Council;

- The Police and Crime Commissioner for Avon and Somerset;
- The Chair of Somerset's Health and Wellbeing Board;
- The Chair of the Safer Somerset Partnership.



## 4. Children in Somerset

In Somerset there are an estimated 109,657 children aged 0 to 17 years old, with a third of the population living in the main urban areas centered on the towns of Taunton, Bridgwater, Frome, Glastonbury and Yeovil (*ONS 2016 mid-year population estimates*).

### 4.1 Levels of Poverty

Somerset remains a relatively affluent county and experiences lower overall levels of deprivation than both the South West and national averages. In 2015, it was considered that 12,150 children aged under 16 were living in poverty, equating to 13.1% of all children. This was the lowest proportion experienced in the previous decade. The national average for England was 16.8%. (Children in Low-Income Families Local Measure, HMRC).

10.6% of primary school children, 8.9% of secondary school children and 10.1% of middle school children are in receipt of free school meals (School census, January 2017).

However, this masks significant variations between geographical areas.

The Somerset Joint Strategic Needs Assessment (JSNA) 2015-16 gives the following information

19 Somerset neighbourhoods (LSOAs) are classified as being within the **20%** most deprived in England (IDACI). All are in urban areas. Sedgemoor accounts for nearly half of areas (9), followed by South Somerset and Taunton Deane (4 each), and Mendip (2).

- 10 Somerset LSOAs are classified within the **10%** most deprived in England.
- 6 Somerset LSOAs are classified within the **5%** most deprived in England.
- The most deprived area is in Bridgwater Sydenham, in which >50% of children live in income deprived families.
- Young people in poor households show a strong concentration in urban housing estates: 50% of income-deprived children live in 5% of the county's geographical area and 10% live in less than 0.1% of the area, all within Taunton, Bridgwater and Yeovil.

West Somerset communities are the most rurally isolated in the county and rank amongst the 15% most deprived local authorities nationally. In a report published by the Social Mobility & Child Poverty Commission (January 2016), West Somerset was ranked the lowest out of 324 local authorities for social mobility.

## Somerset Safeguarding Snapshot 2017-18

<b>Early Help</b>	<p>1,420 open early help assessments (EHA) as at 31/3/18 – this is 27% lower than last year and reflects a policy of not keeping EHAs open for more than one year.</p> <p>1,955 referrals EHA's to the Early Help hub.</p> <p>829 Team Around the Child (TAC) meetings were held during the academic year, a notable increase from 92 in 2016/17, demonstrating increasing confidence in multi-agency Early Help approaches.</p>
<b>Contact and referral information</b>	<p>26,457 contacts to Somerset Direct</p> <p>5,355 referrals made to Children's Social Care (CSC)</p> <p>5,561 C&amp;F assessments started in 2017/18, of which 3,344 were completed within the timescales set.</p> <p>5,585 statutory child and family (C&amp;F) social work assessments completed</p> <p>1,762 CIN cases open as at end of March 2018.</p>
<b>Child protection</b>	<p>37.7 per 10,000 children were subject of child protection plans compared to 43.3 per 10,000 for England and 37.4 for statistical neighbours</p> <p>428 children from 237 families were subject of child protection plans at 31<sup>st</sup> March 2018</p> <p>Over 80% of child protection plans ended within 12 months</p> <p>1.6% of child protection plans ended after more than two years</p>
<b>Children looked after</b>	<p>43.8 per 10,000 children were looked after during the year (average)</p> <p>516 children were looked after on 31<sup>st</sup> March 2018, an increase of 37 over the figure at the end of March 2017</p> <p>31 children secured permanence as a result of adoption (compared with 34 in the previous year)</p> <p>25 children left care under Special Guardianship orders (30 in the previous year)</p> <p>229 children looked after by other local authorities were placed in Somerset at 31<sup>st</sup> March 2018 (199 in 2017)</p> <p>52 residential providers were operating in Somerset, comprising 38 children's homes and 14 other residential settings.</p>



<b>Child exploitation</b>	<p>65 children identified as being at risk of CSE (with CSE banner) as at 31/3/18 (almost 50% higher than last year).</p> <p>There were 446 reports of a child going missing from a foster or residential placement during the year.</p> <p>466 reports of a child going missing from their own family.</p> <p>743 Return Home Interviews were conducted - an increase of 275 reviews conducted in previous reporting year.</p>
<b>Children with additional needs</b>	<p>9,389 children were in receipt of SEN Support as at 31/3/2018, which was 13% less than last year.</p> <p>1,805 children were in receipt of Education Health and Care Plans [EHCP] as at 31/3/2018, with 33 children with a Statement of Special Educational Needs (SEN) as at 31/3/2018.</p> <p><i>(SEND Code of Practice required all Statements of Special Educational Needs to be converted to EHCP. At that time SCC held 1,072 Statements of SEN (January 2014 figure). This figure increased slightly from 2014 – 2018 with move-ins from other LAs. The DFE deadline for conversions from Statements to EHCPs was March 2018. The majority of Statements were converted during 2017 – 2018 in order that SCC met the DFE deadline.)</i></p>
<b>Domestic abuse</b>	<p>665 MARAC domestic abuse cases discussed *</p> <p>891 children were associated with these cases*</p> <p>25% repeat domestic abuse cases discussed at MARAC*</p> <p><i>* Data for 2017/18 data was not available at the time of publishing, therefore this data is from January to December 2017</i></p>
<b>Allegations against staff working with children</b>	<p>487 notifications of allegations of abuse made against staff working with children in 2017/18, compared to 478 in 2016/17.</p>
<b>Private fostering</b>	<p>Thirteen private fostering notifications were made in 2017/18 with 6 private fostering arrangements in place as of March 2018.</p>

## 5. About SSCB

The Somerset Safeguarding Children Board (SSCB) oversees multi-agency safeguarding arrangements across Somerset as required under the Children Act 2004; and in accordance with statutory guidance in Working Together to Safeguard Children 2015 and the Local Safeguarding Children Board Regulations 2006. SSCB draws its membership from a range of local and regional organisations. It is funded by a small number of key partners (see Appendix A for information about partner contributions and budget).

The Board meets quarterly and focuses its attention on areas of safeguarding challenge and concern and the implementation of the SSCB Business Plan.

The Board is supported by a range of subgroups that draw their membership from across statutory, voluntary and community sector agencies that work with children and families. Leadership within the health and education/ schools sectors is provided through the Health Advisory Group and the Education Safeguarding Group respectively.

The SSCB structure, membership and various subgroups are detailed in Appendix B.

More information about safeguarding in education is detailed in Appendix C.

The SSCB Constitution

(<https://sscb.safeguardingsomerset.org.uk/wp-content/uploads/SSCB-Constitution-updated-December-2016.pdf>) sets out how the partnership works, its governance arrangements, and the roles and requirements of its members.

The Working Together Protocol for Strategic Partnership Boards in Somerset

(<https://sscb.safeguardingsomerset.org.uk/wp-content/uploads/2016/02/Working-Together-Partnership-Protocol-2016-17.pdf>) sets out how SSCB works with and relates to a number of other partnerships in Somerset, which focus on children in care, adults in need of safeguarding, community safety, and health and wellbeing.

### 5.1 The SSCB Independent Chair

The role of the independent chair is to hold all agencies to account. The current Independent Chair, Sally Halls, has chaired the Board since 2012 and is accountable to the Chief Executive of Somerset County Council (SCC). She meets regularly with the County Council's Cabinet Member for Children's Services and Director of Children's Services and with senior leaders from partner agencies. She also attends and contributes to the regular performance review meetings held with the Department for Education and the Council's Improvement Partner, Essex County Council. The Independent Chair also conducts meets annually with all partnership members to discuss the performance and contribution of their agency to safeguarding children.

## 5.2 The SSCB Business Unit

SSCB is supported by the Safeguarding Business Unit, which comprises three full time staff (Business Manager, Senior Business Unit Officer, Training Manager) and three part-time staff (Training Administrator, Child Death Overview Panel Administrator and Quality Assurance and Audit Officer. The Business Unit was also supported during the year by part time resource for Service Improvement from Children's Social Care.

## 5.3 SSCB membership and attendance 2017/18

The SSCB met four times in 2017/18. Board attendance suffered a notable decline from 82% in 2016/17 to 71.05% in the reporting year. Partner attendance was challenged during the latter part of the year. The attendance rates by agency are set out in appendix D.

## 5.4 Community members

The Board benefits from two long-standing community members who play a significant role in providing a community perspective to inform the Board's activities. They regularly attend task and finish groups as well as a number of subgroups including Child Exploitation, Training and Development and Quality and Performance, and provide invaluable insight and consistent challenge to the Board. The community members also regularly presented the 'child's voices' and have helped to establish a meetings culture which puts children and young people's experience at the heart of Board discussion and decision making.

## 5.5 Assessing the effectiveness of child safeguarding and promoting the welfare of children in Somerset

SSCB has a statutory duty to scrutinise and evaluate the effectiveness of the safeguarding system and individual agency contributions to safeguard and promote the welfare of children. It uses a range of methods to do this. Key elements include:

- Scrutiny of data and performance information
- Multi-agency audits of frontline case work
- Case reviews
- Section 11 audit (comprising self-assessment and peer challenge by Board partners)
- Section 175/157 audit (of education settings)
- Assurance reporting
- Monitoring risks and issues (through the risk register and challenge log)
- Capturing feedback from children and users of services
- Engagement with practitioners through 'safeguarding conversations' about cases
- Inspection reports

Appendix E gives more information about s11 and s175/57; Appendix F gives more information about the multi-agency audit programme.

Based upon information from these activities, together with consideration of other information such as:

- findings from inspections and through quality and performance reviews;
- national and local priorities;

- issues emerging from practice, identified by those working with children;
- issues raised by Somerset children, young people.

SSCB partners identified a number of areas that it wished to prioritise in order to improve the effectiveness of Somerset's safeguarding arrangements. The priorities were agreed as follows:

Priority 1 - Early Help: *Children and families receive good quality and timely multi-agency help to keep children safe and promote their wellbeing*

Priority 2 - Multi-agency Safeguarding: *Children are safeguarded through multi-agency partnership working.*

Priority 3 - Neglect: *Children who are experiencing or at risk of neglect are identified and safeguarded*

Priority 4 - Child Exploitation (CE) / Children Missing: *Children who are at risk of, or subject to, all forms of exploitation and abuse (including children missing from home, care or education) are identified and safeguarded (to include CSE, trafficking, county lines modern slavery).*

Priority 5 - Strong Leadership and Strong Partnership: *The SSCB leads the safeguarding agenda and develops robust arrangements to co-ordinate and ensure the effectiveness of how children and young people are safeguarded in Somerset.*

These were set out in the Board's business plan for 2017-19 which can be found on the SSCB website:

<https://sscb.safeguardingsomerset.org.uk/wp-content/uploads/Somerset-Safeguarding-Children-Board-Business-Plan-2017-2019.pdf> .

These in turn informed the Board's programme of multi-agency audits, details of which are given in Appendix F.



## 6. Progress against SSCB Priorities in 2017/18

**Priority 1: Early help** - Children and families receive good quality and timely multi-agency early help to keep children safe and promote their wellbeing.

### What we said we'd do

During 2017-18, the Board wanted to evaluate the effectiveness and impact of Early Help arrangements across Somerset by:

- **evaluating the effectiveness** of partners' delivery of their Early Help responsibilities;
- **assessing the impact** of Effective Support Guidance and the **threshold decisions** on children and young people's outcomes (to include use of the EHA and step up and step down arrangements);
- **understanding the views of children and parents/carers** who receive early help support and services.

### What we did:

- **Refreshed** the Early Help Effective Support document;
- **Developed** an Early Help scorecard to tell us the number of EHA contacts by source, those EHAs open/closed with getset services, the number of contacts to getset by area, the number of EHA episodes resulting in no further action (NFAs), escalation, repeat referrals, cases closed with needs met/ or most needs met, or those escalated to CSC;
- **Promoted** the consultation line to practitioners;
- **Conducted** a multi-agency audit of Early Help application at tier 2 (Child Sam audit);
- **Commissioned** an assurance report about the delivery and effectiveness of Early Help.

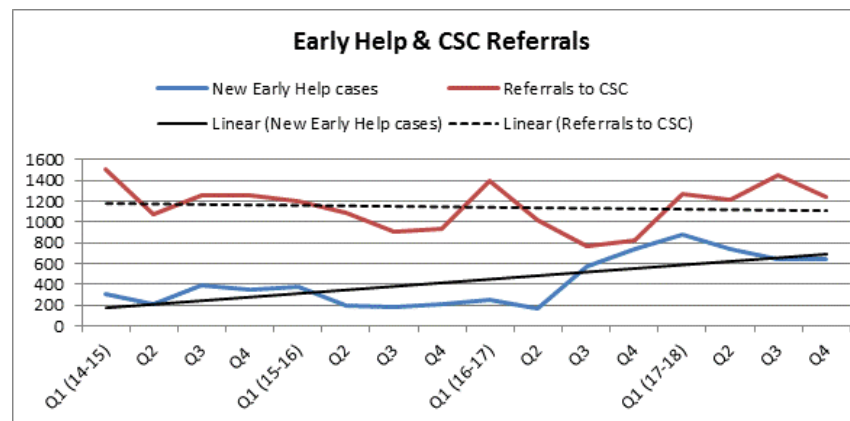
### What we are pleased about

- The **Professional Choices** one-stop-shop website for all Early Help professionals continued to embed well, with uptake that grew rapidly across the year:
  - Registered users increased by 50% from 1,571 in April 2017 to 2,357 at the end of March 2018.
  - Entries in the 'Who's who' directory of professionals increased to 1,441 at the end of March 2018.
  - The Early Help Assessment (EHA) form was downloaded 16,171 times in the year ending 31 March 2018, compared with 7,418 at the end of March 2017.

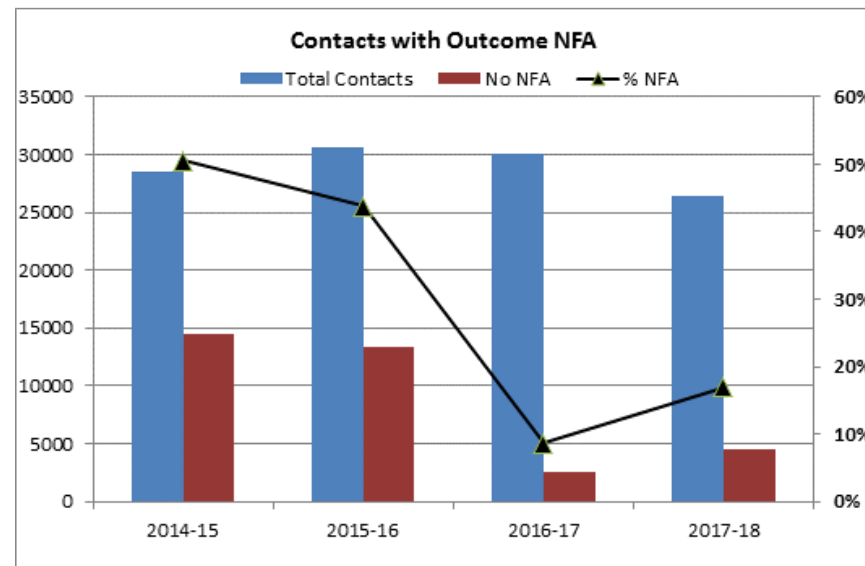
- The multi-agency audit highlighted some **positive practice**;
- 2017 saw a **sharp rise** in the use of EHAs, linked with conversion rates that went on to become referrals, which generally demonstrated improved understanding of thresholds;
- Across the year there was **positive use of the consultation line**, mainly by schools;
- Some partners conducted a **single agency workforce survey** of Early Help application at Level 2 (to baseline knowledge and confidence of the workforce);
- **Team around the School** (TAS) multi-agency meetings were put in place across the year, with some evidence of effective partnership delivery of Early Help;
- **One teams** are beginning to develop in consistency of approach;
- Progress is being made with **integration** of the new Family Support Service, (Public Health nursing) with the getset, Early Help and Children's services.

#### What we are concerned about

- **Early Help and referrals:** There was a decreasing trend in new Early Help referrals in Q3 and Q4 of the reporting year, coupled with a significant increase in referrals to Children's Social Care (CSC) in comparison to the same time the previous year. It is possible that the Ofsted inspection in Q3 and some local workforce issues with reduction in Early Help services resource may have impacted at that particular phase in the reporting year.

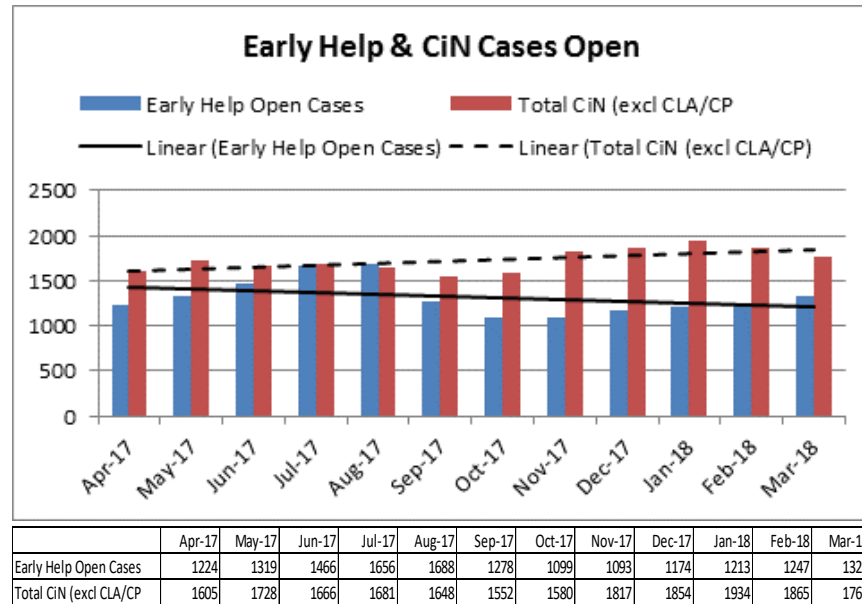


- A rise in the percentage of **re-referrals** to Children's Social Care over Q3 and Q4 following a period of stability.
- **Lack of impact** - over 50% of cases with EHAs with 'needs not reduced at closure', could explain why re-referrals to CSC peaked in 2017/18.
- A significant **data gap** has emerged regarding the Early Help Advice Hub, which helps reinforced the EH process by providing advice, logging assessments and triaging EHAs. However, only cases assigned to getset were being recorded, which means that similar activity across services is not recorded.
- **Missed opportunities** to identify risk and a variable understanding of thresholds was evident in the findings of a SSCB multi-agency audit in Q3 (see appendix F); the assurance report considered by the Board similarly highlighted issues with the 'conversion' of contacts to referrals, the number of redirected referrals to getset, the potential that a number of referrals were made without consent, which also suggested that thresholds were not sufficiently understood.
- **The percentage of contacts to Somerset Direct with outcomes as no further action (NFA):** these almost doubled in comparison to the previous reporting year, giving further evidence of the instability and variability in use of Early Help.



Year	Total Contacts	No NFA	% NFA
2014-15	28,540	14,428	50.6%
2015-16	30,649	13,412	43.8%
2016-17	30,103	2,616	8.7%
2017-18	26,457	4,474	16.9%

- Data on **Early Help and Level 3 children in need (CIN)** suggests a need for the partnership to work towards greater consistency and more common understanding of the thresholds for social care intervention at levels 3 and 4.



- The SSCB multi-agency audit highlighted some practice gaps including:
  - o **confusion** around use EHA as a holistic multi-agency tool and referral for Level 3/4 services
  - o **negative perception** of the Lead Professional role (as overly time consuming)
  - o **lack of professional curiosity** in casework



- GPs and Midwifery/Health Visiting sometimes **working in isolation** to one another
- **lack of awareness** and use of Pre-Birth Guidance.
- **Identification of SEND** issues, at the Early Help stage, needs to be strengthened;
- Concern around the number of referrals going to assessment teams suggested that **thresholds for intervention** by CSC may be too low.

Ofsted (2018) found a similarly mixed picture, concluding that “*Early help services in Somerset have improved, yet are not fully established across the partnership*” and that the ‘Effective Support for Children and Families in Somerset’ (thresholds guidance) has embedded well but requires further integration with partners to increase capacity of Early Help across the partnership.

### What we will do next

SSCB has decided to keep ‘early help’ as a priority area of focus in 2018-19. Attention will shift from developing and assessing process to evaluating impact on outcomes for families through:

- **evaluating the consistency and effectiveness** of partners’ delivery of their Early Help responsibilities;
- **assessing the impact** of the Effective Support Guidance and the threshold decisions on children and young people’s outcomes (including use of the EHA, ‘step up’ and ‘step down’ arrangements and Resolving Professional Differences);
- **understanding the views of children and parents/carers** who receive early help support and services;
- **seeking assurance** that Early Help arrangements are embedding and are effective.

Further information about the EHSCB can be found at **appendix H**.



## Priority 2: Multi-agency safeguarding

*Children are safeguarded through effective multi-agency working*

### What we said we'd do

During 2017/18 SSCB wanted to evaluate the effectiveness and impact of safeguarding arrangements in Somerset by:

- **scrutinising** data and **monitoring** agency compliance with statutory child protection (CP) procedures and local guidance **assessing** impact of the partnership's work around **hidden harm** through focused audit of identification and response to hidden harm and its impact on children
- **understanding effectiveness** of arrangements for **practitioner engagement** through audit and safeguarding conversations with practitioners
- **understanding the views of children and parents/carers** who experience Somerset's CP processes.

### What we did

- **Developed and regularly scrutinised a 'priority 2' scorecard** comprising key performance information;
- **Reviewed multi-agency child protection case examples** against themes from audit and learning reviews to inform learning and where improvements needed to be made;

- **Undertook 'safeguarding conversations'** with practitioners regarding cases which had had successful outcomes.

### What we found

At the end of March 2018, in Somerset, 238 children from 237 families were subject of a child protection plan. The categories of abuse that the plans related to were as follow:

#### Categories of abuse for CP Plans at 31<sup>st</sup> March 2016, 2017 and 2018

Type of abuse	No. at 31/3/18	% at 31/3/18	% at 31/3/17	% at 31/3/16
Emotional abuse	181	41.6	21.5	31.2
Neglect	224	51.5	69.7	57.7
Physical abuse	11	2.5	1.7	4.7
Sexual abuse	16	3.7	1.4	0.4
Multiple factors	3	0.7	5.6	6.1

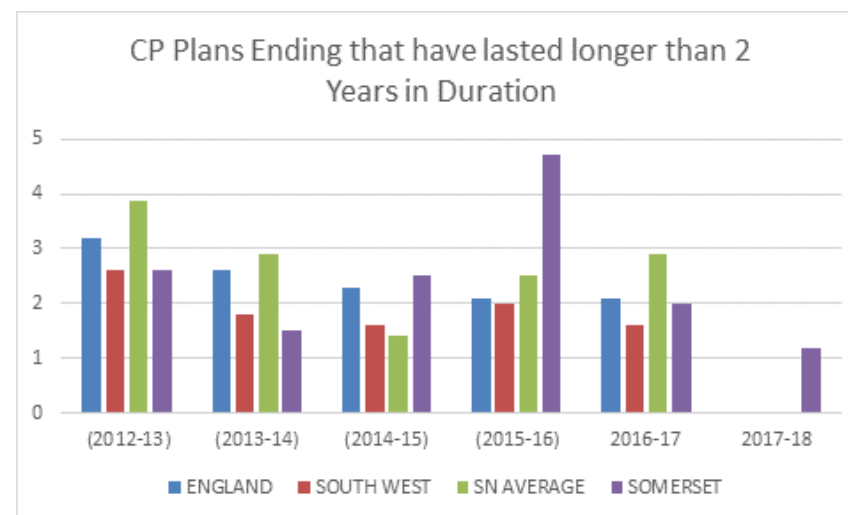
This table shows an increase over the past 3 years in the percentage of plans for emotional abuse. Some fluctuation in percentage of rates has occurred historically. The figures for

the reporting year show a reduced percentage of cases categorised as neglect. This may be the result of work with child protection chairs and multi-agency partners around the use of the category of emotional abuse rather than neglect in cases where the primary concern is domestic violence and other presenting issues are not at a level that would otherwise have met the threshold for child protection. This will need continued monitoring.

### What we are pleased about

- The proportion of long term CP plans has steadily continued to reduce across the year.
- Safeguarding conversations - The Board reviewed three multi-agency practice examples of CP/CIN cases. These highlighted evidence of positive multi-agency practice and a number of learning themes for the Board including:
  - the need to improve the multi-agency system for communication to relevant partners of significant events in a child's life;
  - the availability of accessible low level primary mental health services;
  - consistent application of the resolving professional differences; practitioners understanding each other's roles.
- S11 peer challenge QA workshops and S175/157 schools audits were well received and arrangements for the QA of schools' self-assessments made good progress across the year.
- **A reduction in the duration of child protection plans to 1.2%; this was a further reduction from 2% in the**

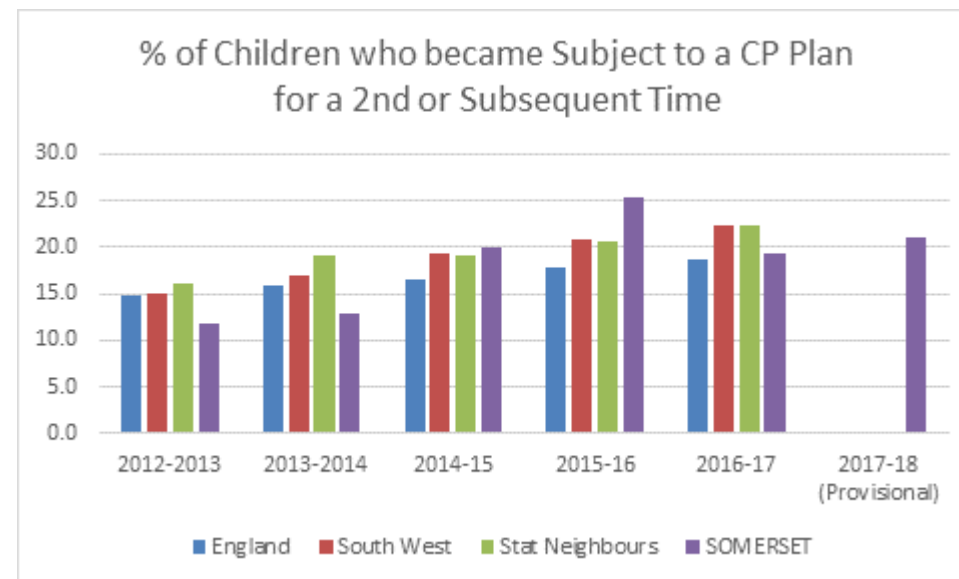
previous reporting year and the 2016/17 national average of 3.4%.



	(2012-13)	(2013-14)	(2014-15)	(2015-16)	2016-17	2017-18
ENGLAND	3.2	2.6	2.3	2.1	2.1	
SOUTH WEST	2.6	1.8	1.6	2	1.6	
SN AVERAGE	3.9	2.9	1.4	2.5	2.9	
SOMERSET	2.6	1.5	2.5	4.7	2	1.2

### What we are concerned about

- The **quality of multi-agency input** at child protection meetings. These included a lack of focus on risk reduction, agency attendance at RCPCs and strategy meetings and the need to improve aspects of S47 investigations. Challenge by CP chairs was also noted by Ofsted as an area for improvement, together with access to advocacy services.
- Quality of '**strategy discussions**' including action planning, interim safety plans, contingency planning also attendance by relevant agencies, dissemination of records, and the need to embed police guidance.
- The **unavailability of police officers** to conduct joint investigations, meaning that children had to repeat their story.
- The **needs of children kept overnight** in police custody are not effectively ascertained.
- The number **of children subject of a child protection (CP) plan** increased slightly across the year; and the percentage of children who are subject of a CP plan for a second or subsequent time increased notably in Q2, although reduced to a more stable position by the end of Q4. Whilst still below the 21.9% held by statistical neighbouring authorities, the national average of 18.7% indicates a concerning performance trend, possibly reflecting the variable understanding of thresholds for intervention which is evidenced in performance data across the year.



	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-18 (Provisional)
<b>England</b>	<b>14.9</b>	<b>15.8</b>	16.6	17.9	18.7	
<b>South West</b>	<b>15.1</b>	<b>17.0</b>	19.4	20.9	22.4	
<b>Stat Neighbours</b>	<b>16.0</b>	<b>19.0</b>	19.1	20.7	22.3	
<b>SOMERSET</b>	<b>11.8</b>	12.9	19.9	25.3	19.3	21.1

Under this priority the Board also undertook to review children in specific circumstances including:

- Unaccompanied asylum-seeking children: the SSCB now receives six-monthly reports on progress;

- Children impacted by domestic abuse: the SSCB scrutinised the domestic abuse Board annual report;
- Planning for children in emergency situations following the Grenfell tower disaster: The SSCB commissioned a baseline report from civil contingencies which will be delivered in Q2 2018/19.

### What we will do next

SSCB will keep 'multi-agency safeguarding' as a priority area of focus in 2018-19 and will evaluate the effectiveness and impact of safeguarding arrangements in Somerset by:

- **scrutinising** data and **monitoring** the quality of agency engagement and compliance with statutory child protection (CP) procedures and local guidance (effective support and resolving professional differences)
- **assessing** impact of the partnership's work with children with additional needs and assure ourselves that the system performs effectively on their behalf
- **engaging with practitioners** through audit, safeguarding conversations and other means.

- **strengthening learning** from both Adults and Children Board reviews
- **assessing impact** of Think Family approaches to safeguarding vulnerable children
- **understanding the views of children and parents/carers** who experience Somerset's CP processes

The SSCB will also seek assurance that:

- there is effective oversight and needs assessment of children kept overnight in police stations;
- housing partners are sufficiently aware of and respond effectively to issues for vulnerable families;
- actions are taken to improve joint enquiries and joint investigations between Police and Children's Social Care.

The Board is also interested to assure itself that children with additional needs are being safeguarded, and will be seeking information about this in the coming year.



## Priority 3: Neglect

*Children who are experiencing or at risk of neglect are identified and safeguarded*

### What we said we'd do

During 2017-2018 we wanted to raise the profile of neglect by:

- **improving the awareness** of professionals about neglect, the issues surrounding it and practical approaches for dealing with it
- **developing, launching and implementing** a multi-agency neglect strategy, practitioner guidance and the Somerset neglect action plan
- **promoting** early identification and responses
- **assessing** the effectiveness of agency responses
- **understanding** children's lived experience of neglect in order to improve practice.

### What we did

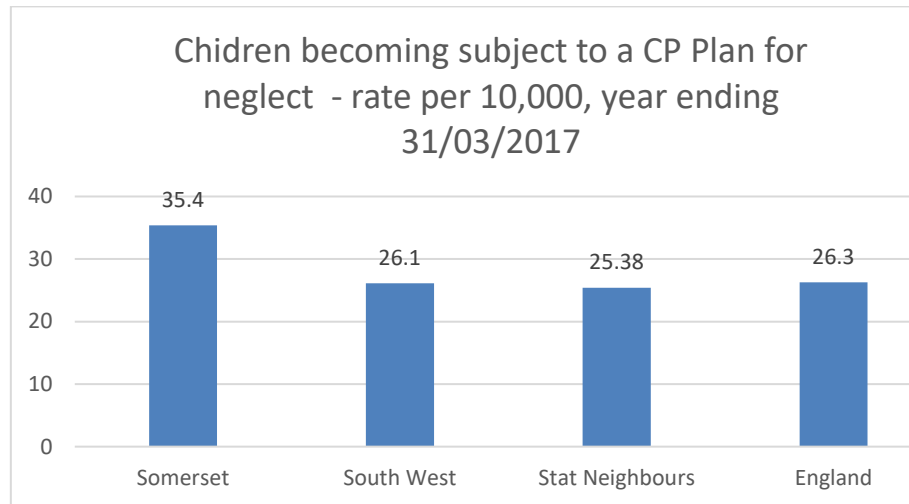
- Developed a **performance scorecard** comprising key performance information;
- Developed and implemented a **multi-agency neglect strategy and action plan**;
- Developed and piloted **guidance for practitioners**;
- Delivered a multi-agency **practitioner conference on neglect**;
- Carried out a **multi-agency audit** in Q1 (see appendix F) of a sample of cases of children subject of child protection plans under the category of neglect;

- Commissioned a learning review into a case of long term neglect which led to a Serious Case Review; learning will be published later in 2018.

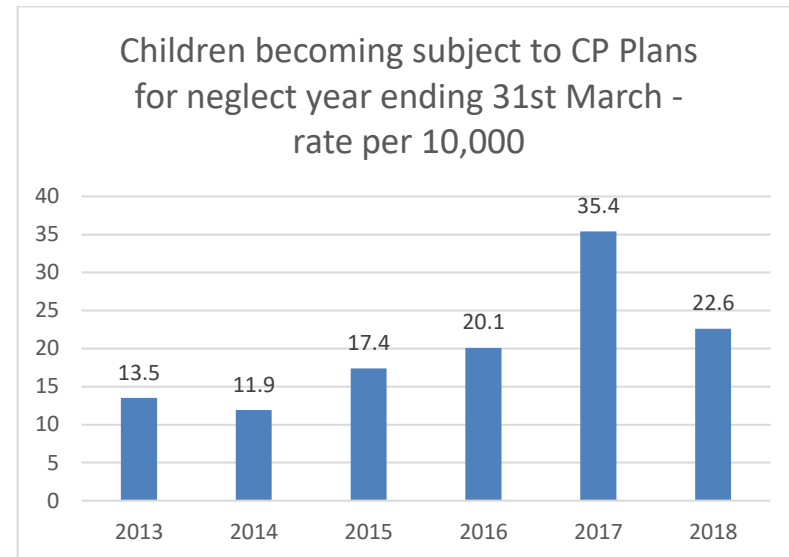
### What we found

Neglect is the most common reason for children to become the subject of a Child Protection Plan. On 31<sup>st</sup> March 2018, a total of 224 children were the subject of Child Protection Plans with the category of neglect. This represented 51.5% of all children on Child Protection Plans.

At the end of 2017, the Somerset rate per 10,000 children becoming subject to Child Protection Plans for neglect was higher than the rates for the South West, our statistical neighbours and for England.



However, this figure appears to have been anomalous, and may have been related to categorisation issues, as the rate per 10,000 for the year ending 31st March 2018 fell to 22.6. Nonetheless there has been an increasing trend over the past five years as shown in the table below.



Despite the high level of child protection plans in relation to neglect, the percentage of early help assessments with neglect identified as a factor was low at 5.9%.

#### What we are pleased about

- The task and finish group working on the neglect strategy and associated activities has had significant support from across agencies;
- The **practitioner conference** was very well received by the 120+ practitioners who attended. The conference increased awareness of neglect and its impact on children and helped pilot the toolkit;
- The practitioner guidance and toolkit has been well received.

### What we are concerned about

- The multi-agency audit found that concerns about neglect were initially reported at a higher level than early help; there was little evidence of Team around the Child (TAC) meetings being used and there were issues of consistency in the identification and categorisation of neglect. Learning points from the audit included the need for:
  - CP chairs to provide consistent advice to conferences about categorisation of neglect
  - further practitioner training and guidance on impact of neglect
  - advocacy to be routinely offered to children in CP conferences
  - plans and reports to be appropriately shared with families in advance of meetings.
- Identification of neglect is not happening early enough. The differentiation in the % of open EHAs with neglect identified as a factor (5.9%) compared with EHAs with one or more hidden harm factors (59.4%) and the increase in children becoming subject of a repeat CP plan due to neglect indicates that further work is required on how effectively neglect is identified, understood and addressed;
- Ofsted found that some children experiencing neglect waited too long before action was taken to improve their

circumstances and child protection conferences were timely but did not always address delay for children who had experienced long term neglect.

### What we will do next

During 2018-19 SSCB will continue to raise the profile of and tackle neglect by:

- **Improving** practitioners' knowledge and skill base in responding to neglect, the issues surrounding it and practical approaches for dealing with it;
- **Promoting and embedding** the multi-agency neglect strategy, practitioner guidance and the Somerset neglect action plan and assuring ourselves of its impact in improving children's lives;
- **Assessing the effectiveness** of current practice, including early identification and intervention in response to neglect, based on understanding gained from SCR and other reviews;
- **Understanding children's lived experience** of neglect in order to improve practice;
- **Sharing learning** from reviews and practice audits.

Board partners will also contribute to and share learning from the local authority peer review (2018/19) on neglect, which will take place in summer 2018; also share and promote the findings of the serious case review.



## Priority 4: Child Exploitation (CE) / Children Missing

*Children who are at risk of, or subject to, all forms of exploitation and abuse (including children missing from home, care or education) are identified and safeguarded (to include CSE, trafficking, county lines, modern slavery).*

### What we said we'd do

During 2017-2018 we aimed to work with partners to:

- **improve** the effectiveness of the strategic approach to tackling CSE/CM in Somerset through implementation of the CSE/CM action plan and redesign of the CSE system
- **evaluate** the effectiveness of partners' arrangements for identifying, assessing and tackling CSE/CM
- **understand** the views and experiences of children and families vulnerable/ and or subject to exploitation in influence the work of the partnership

### What we did

- Significant **awareness raising** about child exploitation and particularly sexual exploitation, including:
  - Twitter and Facebook campaigns;
  - the learning bulletin (TUSK);
  - through delivery of targeted training;
  - the development of the CE champions role;
  - Police communications unit led CSE national events which generated practitioner and public engagement in Q4;

- District councils led work with awareness raising training with taxi drivers and others in the night time economy;

- **Published the 'Fenestra' SCR** into CSE and achieved positive support from local radio to highlight the risks to young people associated with the lack of regulation of tattoo parlours;
- **Shared learning** across the county through a series of four multi-agency roadshows attended by 120 practitioners. The roadshows built upon the two multi-agency practitioner conferences in 2016/17, attended by 183 practitioners, where emerging learning from Fenestra was shared;
- **Briefed partners** about the emerging risks associated with 'county lines' activity in Somerset,
- Progressed work **on harmful sexual behaviour** and peer abuse by children, in response to an increase in concerns. New practice guidance is anticipated in 2018/19;
- **Commissioned an audit** of a small sample of children identified as being at risk of or experiencing child sexual exploitation

- Developed a **multi-agency performance dataset** for child exploitation.
- Held a multi-agency workshop to develop the **CSE strategy and action plans**
- Held further multi-disciplinary workshops to develop a CSE pathway and revise the assessment and screening tools
- Wrote to the Minister about the lack of regulation of **tattoo parlours and piercing studios** and national arrangements which do not adequately address safeguarding risks for children.

#### What we are pleased about

- **Leadership:** a Board member now chairs the CE subgroup
- **Improved awareness and understanding** of CSE and CE through communications activity and practitioner events
- To **increase capacity and improve** the identification of and response to CSE, Avon and Somerset Police has confirmed plans to roll out 'Operation 'Topaz' across Somerset in 2018/19
- Ofsted found evidence of **effective multi-agency actions** to safeguard children at high risk of sexual exploitation
- **Additional time limited capacity** was allocated by Somerset County Council which provided additional capacity to provide leadership across the partnership, and following a systems review resulted in a revised

strategy and action plan, and the revision of pathways, strategy and assessment and screening tools;

- The **multi-agency strategic action plan** was developed following publication of the SCR 'Fenestra' findings.

#### What we are worried about

- **Leadership resource and capacity** to accelerate progress with this priority remains a concern for the SSCB. A bid for additional resource to the Home Office Trusted Relationships Fund was unsuccessful This challenge will need to be resolved in 2018/19
- Audit found that some **plans were not effective** in reducing risks, and there was a need to ensure links were made across the various child planning processes e.g. child protection planning, planning for child in need and children looked after (see appendix F).
- Ofsted reported that they found **responses to children who go missing are variable**. Use of tools to inform safety planning, trend and risk analysis was a key area for development, including return home interviews (RHIs) and how the data they capture are used. Ofsted also cited that the strategic response to children who go missing from home or care and those at risk of child sexual exploitation, needs to be accelerated.
- The Fenestra SCR found that **further work** was needed to ensure practitioners understood national policy around adolescent sexual activity to differentiate

between 'inappropriate relationships' and permitted consensual activity; the need to:

- address the tendency to focus on short term interventions with families
- improvement with multi-agency response to supporting children with their emotional health needs
- reinforced multi-agency collaboration
- safeguarding arrangements and education around CSE within tattoo parlours.
- There are **issues with data integrity** and the dataset does not yet give a clear overview of child exploitation in Somerset.

### What we will do next

SSCB will work with partners to:

- **strengthen leadership** across the partnership and seek assurances that children vulnerable to exploitation receive an effective response to protect them

- **seek assurance** that the quality of response to children who go missing is consistently good
- **assess the impact** of the strategy and action plans for responding to child exploitation
- **evaluate the effectiveness** of partners' arrangements for identifying, assessing and tackling child exploitation, (including training and use of the Champion role)
- **understand** the views and experiences of children and families vulnerable to / experiencing exploitation, particularly those with multiple vulnerabilities, such as home educated children

Activities will include:

- improving the collection and quality of data;
- improving the quality of return home interviews so they inform planning for children and help to reduce risk.



## Priority 5: Strong Leadership and Strong Partnership

*The SSCB leads the safeguarding agenda and develops robust arrangements to co-ordinate and ensure the effectiveness of how children and young people are safeguarded in Somerset*

### What we said we'd do

During 2017-2018 we aimed to achieve strong leadership and strong partnership by:

- **working with partners** to deliver successfully against the Business Plan and associated work plans set for SSCB and its subgroups / working groups
- **continuing to strengthen the governance** interface between SSCB and other key strategic forums
- **communicating and raising awareness** about safeguarding to individuals, organisations and communities
- **maintaining** SSCB's Learning & Improvement Framework, facilitating, cascading and embedding learning from evidenced based practice and assessing impact of learning activity
- **scrutinising and challenging the performance** of partner organisations around their safeguarding work
- **engaging** with children, young people and families to capture their views and experiences, influence the partnership's work and evaluate the impact of partner activity on their outcomes.

### What we did

The SSCB Business Plan 17-19 states that the SSCB commits to an approach that keeps safeguarding and the

welfare needs of children and young people as central to its core business, and that lessons are learnt, and good practice is embedded. The Board operates a constructive challenge and assurance function for both Board partner's members and external organisations. There are sound governance and leadership arrangements in place, Board meetings are well attended and increasingly challenging. Preparations for new safeguarding arrangements are at an early stage.

- **Published two SCRs** and received regular progress reports on progress of multi-agency action plans and outcomes achieved
- **Cascaded learning** through practitioner learning events and roadshows, agencies' own training and briefing sessions, newsletters, monthly bulletins and 'Working Together' training. A third SCR focusing upon neglect was initiated in Q2 which will report in Q3 2018/19

### What we are pleased about

- Having established '**Safeguarding Conversations**' as a positive method of engaging with practitioners and learning from successful multi-agency safeguarding practice
- Good levels of **involvement and attendance** by agencies across the majority of work streams

- Two of the three NHS providers are developing **joint safeguarding arrangements**, enabling improved consistency and engagement
- Ofsted found that **partnership working is improving**, with clear senior commitment to addressing issues which affect children
- The **Resolving Professional Differences Protocol** was widely promoted, and challenges were noted as being more appropriate by the end of the year
- Practitioners have systematically received important **guidance and learning** through use of social media, improved website and the implementation of incrementally increasing downloads of monthly learning (TUSK) bulletins and quarterly newsletters
- A broad range of data about the **child's voice** is now available to the Board
- There was **strong engagement** from across the partnership in the Section 11 peer QA workshops which was welcomed by partners.

#### What we are concerned about

- Some partners experienced particular **resource and capacity challenges** which impacted upon progress of SCRs
- Changing **leadership arrangements** affected responsive engagement with some SSCB activity and particularly priority 4 (CSE)

- **Attendance** by relevant staff at some multi-agency training events impacted upon 'Working Together' practice development across the partnership
- There have been particular challenges in **progressing the CE champion's role** across the partnership due to inconsistent and insufficient multi-agency engagement throughout the year
- **Reduced support to CDOP** from the CCG
- **Thresholds for intervention** at level 4 (CSC) remain a consistent theme for agency challenge.
- The time taken to meet the emotional health needs of children looked after
- Delays in police investigations.

Ofsted found similarly, reporting that partnership working is not yet consistent.

#### What we will do next

Whilst no longer a priority for SSCB in 2018/19, partners will be working together to develop new multi-agency arrangements for safeguarding for Somerset, following the Children and Social Work Act 2017 and the publication of the revised statutory guidance, *Working Together to Safeguard Children* (2018).

## 7. Case Reviews

An important function of LSCBs is to undertake reviews. Working Together (2015) states that:

*Professionals and organisations protecting children need to reflect on the quality of their services and learn from their own practice and that of others. Good practice should be shared so that there is a growing understanding of what works well. Conversely, when things go wrong there needs to be a rigorous, objective analysis of what happened and why, so that important lessons can be learnt and services improved to reduce the risk of future harm to children.*

The different types of review include:

- Serious case reviews
- Child death reviews
- A review of a child protection incident which falls below the threshold for an SCR (in Somerset, these are called learning reviews;
- Thematic reviews, and
- Review or audit of practice in one or more agencies

### 7.1 Serious Case Reviews

A serious case review (SCR) is undertaken for every case where abuse or neglect is known or suspected and either a child dies; or a child is seriously harmed and there are

concerns about how organisations or professionals worked together to safeguard the child.

SSCB published two SCRs in 2017/18. A third was initiated, which will be published later in 2018.

#### 1) SCR 'Fenestra'

This SCR focuses upon the exploitation and sexual abuse of the two child victims, Child C and Child Q. The review also recognises learning from the experiences of the other seven young women who were identified during Operation Fenestra, who were also sexually abused by the perpetrators when they were children. Whilst no child died as a result of the abuse they suffered, they have nevertheless been severely affected by what has happened to them.

SSCB was extremely grateful for the consent of three of the young women and the parents of one to help us with this review, to contribute their thoughts and reflections, and help us fully understand what happened in order that we might be better informed in preventing such exploitation in the future. A number of other young people, some victims themselves of exploitation and abuse by others, also contributed valuable insights.

The scope of the serious case review aimed to identify the strengths and gaps in multi-agency responses to child sexual exploitation (CSE). The 'inappropriate relationship' model of CSE was the focus of this case and should provide additional learning to previous high profile CSE case reviews.

This model is defined as:

*'Usually involving one perpetrator who has inappropriate power or control over a young person (physical, emotional or financial). One indicator may be a significant age gap. The young person may believe they are in a loving relationship'. (Puppet on a string: The urgent need to cut children free from sexual exploitation Barnardo's, 2011).*

This particular model of abuse is distinct from the models described in other high profile serious case reviews, which have focused on victims either being coerced into having sexual relationships with the boyfriend's associates (known as the 'boyfriend' model) or where they may be forced/coerced into sexual activity with multiple men (known as organised/networked sexual exploitation or trafficking).

### What we learned

There were eight key findings:

1. There can be difficulty distinguishing between informed consent for adolescent sexual activity and coercion/inappropriate relationships - because of difficulties reconciling national guidance and the law relating to sexual activity.
2. There is a tendency to focus on short-term intervention for perceived parenting deficits, without taking time to hear parents' worries about risks outside the family.
3. The need for CSE investigations to be able to develop consistent relationships with alleged victims over a long period.

4. Linking information within and between agencies is integral to protecting children from harm – improvements have been made but there is scope for further development.
5. Children who are at risk of, or who have experienced CSE need accessible, timely and skilled support for their emotional and mental health problems.
6. There is a need for early multi-agency collaboration and consistent, persistent relationship-based intervention.
7. Current arrangements in relation to piercing and tattoo salons do not adequately address safeguarding risks.
8. The practice of some primary care medical services (as advised by medical indemnity insurers) is contrary to statutory requirements in relation to their involvement in serious case reviews; this risks undermining the ability to learn lessons and improve safeguarding of children in the future.

### What we did

The Board considered the findings carefully, and developed a multi-agency action plan in response. A number of agencies also developed their own action plans. These are monitored by the SSCB Child Exploitation subgroup with oversight from the Learning and Improvement subgroup. A number of roadshows took place across the county to share the learning from the review; the findings in the report have been incorporated into training for designated safeguarding leads.

### What has changed?

The SSCB has noted significant improvements in the way partners have responded to children at risk of sexual exploitation, whilst acknowledging that further work is needed

to safeguard children at risk from or experiencing this type of abuse. This continues to be progressed through the work of individual agencies and also the Board's Child Exploitation subgroup.

The [SCR Fenestra](#) and the [SSCB response](#) can be found on the SSCB website.

## 2) SCR 'Child Sam'

The SSCB published the full report of the SCR Child Sam in September 2017.

Child Sam was a very young infant who had repeated contact with a range of health professionals before being taken to a Somerset Minor Injury Unit by members of his family. Sam had suffered extensive non-accidental head injuries which left him with significant brain damage and life-long impairments. Child Sam's stepfather was subsequently convicted of grievous bodily harm and received a custodial sentence.

### What we learned

Findings related to effective pre-birth planning, the need to understand the significance of family history, the identification of risk and vulnerability in families where domestic violence is a feature and the importance of sharing information and working together to provide children and young people with the help they need.

The review made several recommendations relating to:

1. Use of the pre-birth protocol;

2. Identification of and response to the risks and responsibilities within families;
3. Training for health services staff regarding measuring, recording and plotting growth measurements for infants, and the presenting signs and symptom of brain injury in young babies;
4. The need for full and formal recorded handover arrangements where there are unavoidable changes in staff;
5. Understanding and application of 'thresholds' for intervention at level 2;
6. Identifying and assessing risks within the wider family context and sharing the information within and across agencies appropriately.

### What we did

Learning from the review has been cascaded through the TUSK learning bulletin and covered in training for designated safeguarding leads. A multi-agency action plan in response to the recommendations made by the review team was developed and implemented, alongside action plans within individual agencies.

### What has changed?

Practitioner guidance including a 'pre-birth toolkit' has been developed; improvements have been made in how agencies identify, assess and respond to the risks and vulnerabilities within families where domestic abuse is a concern.

The [full SCR](#) can be found on the SSCB website.



## SCR ‘Neglect’

In the summer of 2017 a learning review was commissioned to consider the case of children who had experienced neglect over a period of years. During the course of the review, information was shared that indicated that the criteria for a serious case review had been met. The resulting SCR will be published in 2018/19.

Emerging themes include recognising and taking effective action to tackle neglect, agency engagement with CP/CIN processes, understanding and application of Early Help and the lead professional role, understanding the impact of adolescent neglect, recognising the additional vulnerabilities of disabled children, record keeping, leadership and oversight, supervision and quality assurance of practice.

## 7.2 Child Death Reviews

The SSCB is responsible for ensuring that a review of each death of a child normally resident in the SSCB’s area is undertaken by a multi-agency Child Death Overview Panel (CDOP). The CDOP has a fixed core membership drawn from organisations represented on the SSCB, with flexibility to co-opt other relevant professionals to discuss certain types of death as and when appropriate. Through the year, Somerset’s CDOP was chaired by a Consultant in Public Health.

CDOP publishes an annual report, which is obtainable via the SSCB website.

## 7.3 Learning reviews

### 1) “Taylor” family

A learning review was held in May 2017 concerning the Taylor family, whose children were referred to CSC as their mother had been a victim of serious domestic abuse incidents. There were delays in the process and a failure to share information about the incidents in a timely way. The learning review took the form of a case discussion with key professionals.

### What we learned

The review found that:

- In common with other clients at high risk of domestic abuse, Mrs Taylor consistently minimised what had happened.
- The health visitor demonstrated consistency and tenacity in working with the family.
- The social worker’s direct work with one of the children demonstrated good practice.
- There was a failure to link the children in the household to the domestic abuse incidents on the police system—attributed to the new police system. This led to delays. The system has subsequently been revised.

- There was a delay between the first incident and discussion at the One Team meeting, and another delay before the health visitor was emailed.
- The One Team and/or the health visitor could have completed a 'DASH' assessment which would have supported escalation and prevented drift.
- There was difficulty in gaining information from other police forces; in this case information about Mr Taylor's previous convictions was provided by children's services in another area.

### What we did

SSCB reiterated through its learning bulletin and through the Board that any agency can complete a 'DASH' risk assessment for domestic abuse and clarified the process for escalating concerns to the police. The Safer Somerset Partnership undertook to review the DASH to ensure it is effective.

## 2) Child F and Child G

Siblings, both aged under 2, were found to have unexplained injuries including bruising to the face and evidence of fractures. Practitioners also had concerns related to domestic abuse, neglect of the children, parental cannabis use.

A learning review was carried out in spring 2017 because although the case did not meet the criteria for either a SCR, it was felt that lessons could still be learned and examples of

good practice highlighted. The review took the form of a 'desktop' analysis of learning from agency reports and reflection sheets.

### What we learned

The review noted the need for improvements in a number of areas:

- Missed opportunities to safeguard the children—it is vital to share concerns with other agencies;
- Record keeping – it is important for work to be written up in a timely fashion, decisions recorded, and management advice recorded appropriately;
- Third party information—third party information should be acted on, and/or followed up to ensure a referral has been made;
- Inter-agency working — when multiple agencies are involved, identifying a lead professional and holding a TAC will ensure that a shared plan is created. This will also help ensure that financial and/or personal crises do not overshadow the needs of the children;
- Assessments — the need to consider the family composition and ensure that information is brought forward from one assessment to the next;
- Lack of engagement — this should heighten concern and not be part of the rationale for no further action in a case.

### What we did

Findings were shared through the SSCB Things You Should Know (TUSK) learning bulletin.

### 3) Child H

A multi-agency practice review was held in December 2017 after child H was referred to the Learning and Improvement Subgroup by the Child Death Overview Panel. Child H was a child with severe disabilities who died from natural causes but there were concerns that, prior to death, the child was living in unsuitable housing and did not have a school place.

#### What we learned

- While Child H was in hospital referrals were made to various health teams and social care. As the concerns referred required early help and medical support. H had been in the UK for about four months at that point. No formal discharge planning meeting was held before H left hospital.
- The first referral to Children's Social Care was not accepted. A second referral to Children's Social Care was accepted, and the social worker visited the family, with an interpreter. Child H's mother gave more details about the domestic abuse she had experienced in her home country. This was verified with authorities in the previous country.
- Child H was not identified by any agency as a child missing education.

#### What we did

Following a learning event, recommendations in response to findings were accepted by the Board. Actions to address the recommendations are monitored through the Learning and

Improvement subgroup. Learning was disseminated through the SSCB TUSK learning bulletin and professionals reminded of the significance and their responsibility towards children missing from education; also, the importance of having information available in common languages and interpretation services.

## 7.4 Thematic reviews

Two thematic learning reviews were initiated in 2017/18 and will report in 2018/19.

### 1) Review of child deaths through suicide or 'probable' suicide.

A number of children have died in Somerset between 2009 and 2018 as the result of suicide or in circumstances deemed as 'probable' suicide. A thematic learning review was initiated in the reporting year to ascertain any common themes arising from the deaths of children by suicide or probable suicide in Somerset and identify anything unusual or different from the published national evidence. The review also aims to identify actions that the SSCB and its partners could take in order to support young people and reduce the likelihood of further suicides or attempted suicides among children.

The review will conclude in 2018/19 and findings will be shared across the partnership.

## 2) Review of cases where sex offenders have access to children

Following consideration of a small number of serious incident notifications together with information from local and national inspections, the Board initiated a thematic review to examine practice in relation to the assessment and management of risks posed by registered sex offenders to children, in order to identify and address any practice improvements that may need to be made.

This review will also conclude in 2018/19 and findings will be shared across the partnership.



## 8. Other activities and functions of the SSCB

LSCBs have a number of statutory functions. These are:

(a) developing policies and procedures for safeguarding and promoting the welfare of children in the area of the authority, including policies and procedures in relation to:

(i) the action to be taken where there are concerns about a child's safety or welfare, including thresholds for intervention;

(ii) training of persons who work with children or in services affecting the safety and welfare of children;

(iii) recruitment and supervision of persons who work with children;

(iv) investigation of allegations concerning persons who work with children;

(v) safety and welfare of children who are privately fostered;

(vi) cooperation with neighbouring children's services authorities and their Board partners;

(b) communicating to persons and bodies in the area of the authority the need to safeguard and promote the welfare of children, raising their awareness of how this can best be done and encouraging them to do so;

(c) monitoring and evaluating the effectiveness of what is done by the authority and their Board partners individually

and collectively to safeguard and promote the welfare of children and advising them on ways to improve;

(d) participating in the planning of services for children in the area of the authority; and

(e) undertaking reviews of serious cases and advising the authority and their Board partners on lessons to be learned.

Where they have not been covered in other areas of this report, they are recorded in this section.

### 8.1 Allegations Management – Designated Officer (LADO)

The role of the Designated Officer is to be involved in the management and oversight of allegations of abuse made against people who work with children. This includes those in either a paid or voluntary role where it is alleged that they have:

- behaved in a way that has harmed a child, or may have harmed a child;
- possibly committed a criminal offence against or related to a child; or
- behaved towards a child or children in a way that indicates they may pose a risk of harm to children.

(Ref: *'Working Together to Safeguarding Children...'* (2015),

There were 487 (478 in 2016/17) notifications of allegations during 2017/18 consisting of:

- 194 allegations of physical abuse (40% of all allegations)
- 123 allegations of sexual abuse (25% of all allegations)
- 118 allegations of neglect / inappropriate behaviour (24% of all allegations)
- 52 allegations of emotional abuse (11% of all allegations).

### What was done?

A review of allegations of physical abuse, the largest category, has led to regular meetings and scheduled forums with safeguarding colleagues, in both SCC and partner agencies e.g. District Councils, to share quality assurance information relating to providers. This in turn has led to a specific action to work with providers to improve safer recruitment practises and the employment of suitable staff.

Work has also been undertaken with Avon & Somerset Police, in particular its Professional Standards Dept., to ensure allegations against officers that meet the criteria to trigger the managing allegations procedure are being reported.

The statutory timescale of one working day to report concerns around inappropriate behaviour is being monitored to ensure compliance by agencies / organisations. There is appropriate challenge where the timescale is not met.

There are quarterly quality assurance meetings to evaluate the consistency and standard of actions and decision making taken by the Designated Officer in managing individual cases.

The managing allegations business process is being developed as part of a contingency plan that ensures established processes are preserved and systems maintained when there are changes in the workforce.

### How well was it done?

The re-inspection of the LA Children's Services (Nov.17) by Ofsted found that the local authority '*identifies and investigates allegations of abuse against professionals effectively*' commenting that action plans and case recording are comprehensive. It acknowledged that on-going cases are tracked well and that this ensures that investigations are well coordinated and responsive to children's needs.

The continuing promotion of the role of the managing allegations procedure with agencies / organisations has seen the total number of notifications rise year on year with an increase of 2% from the previous reporting period.

However, over a 1/3rd of notifications received did not meet any of the criteria to trigger the managing allegations procedure. This is an 11% increase from last year. This indicates a need for further training for managers / headteachers in applying the criteria to reported incidences and reflects the pressure on regulated settings to have evidence of consultation with the Designated Officer.

There is a steady improvement in meeting target timescales to resolve individual cases as demonstrated by the month on month % increase in the closure of cases reducing the anxiety

for children, their families, carers, and the employee / volunteer.

The embedding of a quality assurance process has enabled a closer scrutiny of individual cases managed by the Designated Officer, including the assessment of risk, decisions taken and the rationale to close cases. The audit process evidences consistency in action and decision making by the Designated Officer. The independent quality assurance group has endorsed the decision making by the Designated Officer in all cases audited.

#### **What difference has been made?**

All notifications are sent to Somerset Direct, the initial point of contact to report child protection and welfare concerns. This ensures that allegations against people who work with children are not dealt with in isolation from Children's Social Care and / or the Police and the safety and welfare needs of children are prioritised and co-ordinated.

The active oversight of cases by the Designated Officer ensures that when a child is identified as being at risk immediate actions are taken to safeguard and manage the risk to other children.

Regular auditing of a sample of cases ensures that decisions taken by the Designated Officer are child centred, are based on a clear rationale, demonstrate best practice, are clearly recorded and applied consistently.



#### **What next?**

The LADO will be working on the following areas in the coming year:

- a) *Promotion*
  - Work with partners to reduce the number of inappropriate notifications whilst increasing the reporting of allegations that are appropriate as they meet the threshold.

- Increase the number of notifications received within one working day.
- Continue to raise awareness of the managing allegations procedure particularly with faith based groups.
- Improve the % of closure rates of notifications.
- Further delivery of the nationally accredited safer recruitment course.

*b) Issues to highlight*

- The high number of inappropriate notifications that do not meet the threshold for reporting.
- The need to examine the numbers of notifications from the Police & NHS trusts.
- The number of notifications not reported within the statutory timeframe of one working day.
- The lengthy time that certain cases remain on-going e.g. those cases subject to criminal investigations and court proceedings.

## 8.2 Multi-Agency Training

Multi-agency training, led and coordinated by the SSCB training manager, continues to be valued and evaluated as highly positive across all sectors of the partnership. The SSCB partner organisations support the training in kind with key speakers and free venues to keep the cost to agencies as low as possible. The training became fully self-financing in the reporting year.

## What was done?

This year, a total of 53 courses were delivered across 2017/18

A total of 1,224 training places were provided, in addition to 92 attendees at four Multi-agency Practitioner Information Groups (MAPIG) sessions, 126 multi-agency practitioners attendees at the Serious Case Review, Operation Fenestra, MAPIG sessions and 123 attendees at the annual Multi-agency Practitioners conferences, 'Working Together to Tackle Neglect'.

Participation by agencies can be found in **Appendix G** SSCB multi-agency training attendance.

Introduction to Child Protection and the refresher courses continue to be overseen by the Training Manager to ensure the key messages both local and national are embedded in the learning outcomes.

The Multi-Agency Working Together and update modules for agency safeguarding leads, continued throughout the year to reflect the recommendations and learning from the serious case reviews, learning reviews and safeguarding conversations. The Working Together training takes delegates through the complexities of a family who initially need the support of early help to the escalation of concerns which require the involvement of child protection services, drawing out issues of neglect, CSE, Prevent, and physical, sexual and emotional harm. The training also drew attention



to areas of concern identified from the Operation Fenestra SCR such as 'cuckooing' and 'county lines'

Participants consider the impact of hidden harm and disguised compliance on the welfare of the children. The Voice of the Child is recognised through the case study and the process and benefit of Early Help Intervention is a strong theme running throughout the training.

The Working Together course continued to be supported with input from a multi-agency pool of experts from across the partnership, including health, children's social care, police, independent safeguarding review officers and targeted youth support.

Arrangements with partner agencies ensured appropriate multi-agency expertise was available to contribute to the multi-agency safeguarding training.

The Working Together modules continued to focus this year upon the use of early help assessments.

This aimed to support greater consistency of application and understanding of thresholds across the partnership, promote the role of the lead professional and understanding requests for involvement from children's social care services.

Specialist themed courses were offered throughout the reporting year and were applicable, provided by a pool of trainers who are expert in Child Sexual Exploitation, parental mental health and its effect on children, and online safety. All

delivery is underpinned by 'Think Family' approaches to practice.

The vision for this approach was to build a skilled group of trainers able to respond to safeguarding training needs across the broader Somerset children's workforce. This also helped to standardise approaches to training, opportunities for peer review and a forum to share practice case examples.

2016/17 Multi-agency Practitioner Interest Group (MAPIG) sessions focussed on 'Confident & Competent Multi-Agency Working with Children in Need' approaches and joint working between the agencies. These sessions were repeated in each of the four areas of the county. The sessions were delivered by the Consultant Social Worker who led the Child in Need Plan.

The aims of the session were to explore an example of good multi-agency practice from pre-birth and to have a reflective opportunity to consider all aspects of practice. Safeguarding conversations are a new initiative, launched last year by the SSCB, and following a successful pilot there is now a programme of meetings to be held quarterly around the county.

Safeguarding conversations provide an opportunity for members of the Board to sit down with a group of professionals involved in one case with the aim of identifying areas of good practice that can be shared and lessons that can be learned. They can also reflect on how well policies and

procedures are understood and used in practice and on the effectiveness of multi-agency working.

### Summary of messages

Practitioners told us

- Excellent evidence of good practice - would be good to know how CSC intends to replicate this.
- Very interesting as I sit on the L and I subgroup to follow this case through.
- It's nice to see how multi-agency working really supports families.
- Very informative session highlighting successful inter-agency working and working with families using a doing with approach as opposed to a doing to.

The response to the session suggested that attendees left feeling motivated and identified that the approach professionals should be taking towards multi-agency working with children in need should be under-pinned with the aspiration to encourage communication and open and transparent approach.

Further details can be found in the Training Annual Report which is available on the SSCB website.

<https://sscb.safeguardingsomerset.org.uk/wp-content/uploads/Training-Annual-report-17-18-for-annual-report.pdf>



### 8.3 Safety and welfare of children who are privately fostered

#### What has been done?

Historically the numbers of privately fostered children in Somerset have been low; in 2017/18 thirteen notifications were received; this is the same number as the previous year. Only one of the children in the 2017/8 cohort was also privately fostered in the previous year.

The sustained number of notifications in 2017/8 represents an incremental rise from the ten notifications in 2015/16 and five notifications in 2014/15.

Somerset meets its responsibilities for children who are privately fostered through the implementation of a private fostering assessment, completed by a qualified social worker from within the area social care teams.

All private fostering arrangements have been assessed and are subject to regular visits as required by the Private Fostering Regulations.

### **Who are our privately fostered children?**

Of the thirteen children privately fostered during 2017/8, seven were male and six female.

All but one of the children were aged 14 or 15 when they became privately fostered. The youngest child is now 3 and has been privately fostered by the same person from a very young age.

None of the privately fostered children had any identified disability or additional educational needs.

Five of the boys became privately fostered due to a breakdown in family relationships and one was an international student, whereas five out of the six girls were international students from western Europe, placed with host families for up to nine months, in order to improve their English. The girls were all placed by a single student exchange agency. One girl was privately fostered due to family breakdown.

A family member notified the Local Authority for all children who were privately fostered due to family breakdown.

For those children who were international students, the student exchange agency notified the Local Authority for all the children they placed. For the one male international student, not placed by this agency, the college they attended in Somerset, notified the Local Authority.

Of the eight private fostering arrangements that ended during 2017/8 all had lasted less than twelve months, as the child either became sixteen or returned home. Two of the international students returned home earlier than planned due to homesickness.



## Communication and Impact

During 2017 the private fostering factsheet was sent to boarding/independent schools, host families and other organisations to remind them of their statutory responsibility to notify the Local Authority about any private fostering arrangements.

The sustained numbers of notifications this year is an indication that the raising awareness work completed continues to be effective in supporting the identification of children who are privately fostered.

## Next steps

Continue to work with safeguarding leads, particularly in schools and in health settings, to sustain improved awareness of what private fostering is and the need to refer such arrangements to the local authority.

## 8.4 SSCB Communications

The SSCB business unit have continued to build on the work from last year, to make the SSCB website the “go-to” hub for all information relating to child safeguarding in Somerset.

Greater use of twitter and Facebook have also contributed to the Board’s increased digital presence across the partnership, with notable success in publicising serious case review publications and directing practitioners to the website.

Downloads of newsletters and TUSK (Things You Should Know – the SSCB learning bulletin) continue to be good, averaging 1100 downloads per edition\*. Practitioners tell us that these publications are invaluable in keeping them up to date with latest policy, learning from SCRs and other reviews and understanding the work of the partnership.

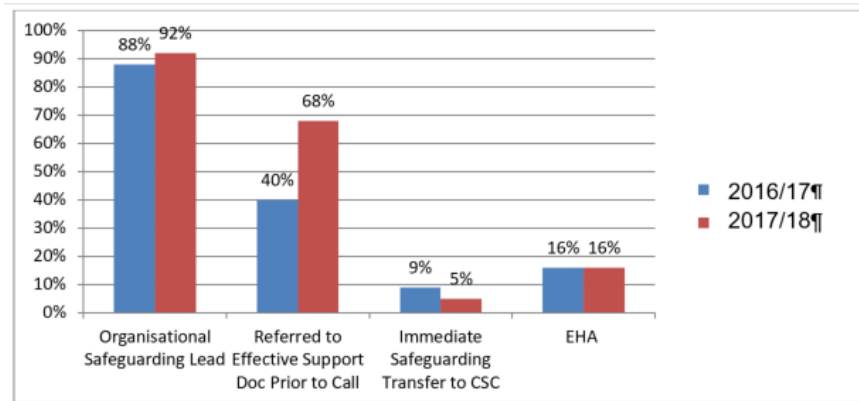
*\*These download figures count the number of times each publication has been downloaded from the SSCB website. They do not account for managers cascading the download within their own agencies.*

## 8.5 Safeguarding Leads Consultation Line

The consultation line was established in 2016, to provide safeguarding consultation and guidance to partner agencies to cultivate understanding of what level of intervention is appropriate to the presenting needs.

There has been a **60% increase in calls** to the consultation line since the last financial year (604 calls during 2016/17, compared to 967 during 2017/18), with 92% of calls coming from Organisational Safeguarding Leads (OSLs), compared to 88% last year.

**Comparison summary of calls to consultation line 2016/17 and 2017/18**

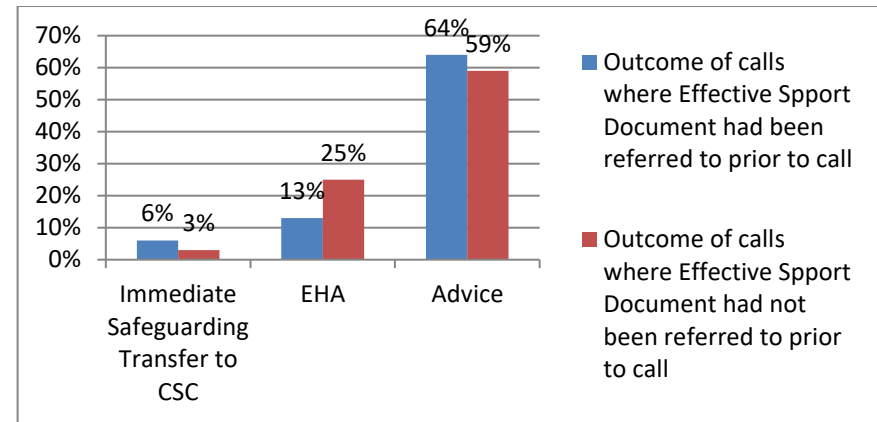


Whilst the volumes of calls to the consultation line have increased from last year, there is not a remarkable difference in terms of the outcomes of these calls; there has been a 4% decrease in calls requiring an immediate safeguarding transfer to Children’s Social Care. This could be indicative of practitioners being more comfortable with thresholds, and therefore not requiring the reassurance from the consultation line regarding these urgent referrals. However, the numbers are so small it is difficult to definitively draw this conclusion.

There has been a decrease of 28% in callers referring to the Effective Support Document prior to calling the consultation line, which could further indicate that practitioners are more aware of and comfortable with thresholds. Conversely, it could also suggest that practitioners are not using the Effective Support Document due to lack

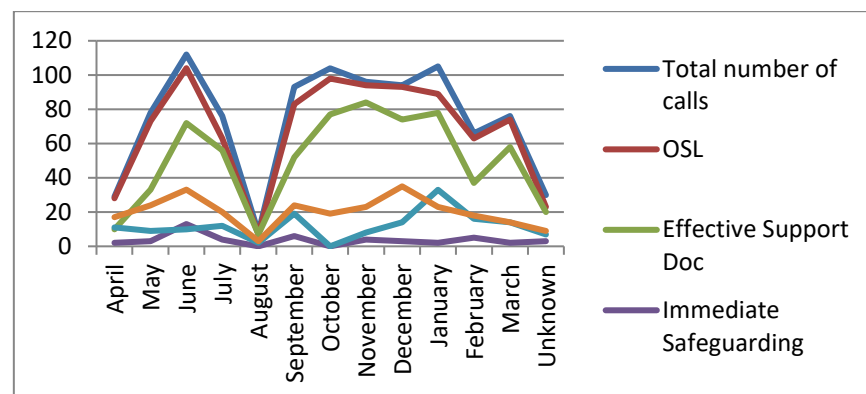
awareness/time/using the consultation line instead of utilising the document.

**Outcomes where Effective Support Document had/had not been used prior to call**



The data indicates that whilst there is not a significant detriment to practitioners not using the Effective Support Document prior to making a call to the consultation line in terms of immediate safeguarding referrals, it does seem to indicate an issue around practitioners completing EHAs, with 25% of callers being advised to complete an EHA.

## Pattern of calls to consultation line 2017/18



Calls to the consultation line have remained consistently high, the obvious exception being August, which coincides with the school summer holidays. Figures for April are very low, which is not consistent with the rising trend from the end of last year, but could be due to data collection issues at the start of the new financial year (it is also possible that missing calls are accounted for within the “unknown category”). June was the busiest month for the consultation line, with 112 calls, closely followed by October and January with 104 and 105 calls respectively.

### 8.6 Voluntary and community/faith sectors

The SSCB built on links developed with the Voluntary, Community and Social Enterprise (VCSE) strategic forum through delivery of a consultation workshop in Quarter three. The workshop aimed to raise awareness of children’s

safeguarding across the network and to consult with VCSE partners about how they wish to engage with the children’s safeguarding agenda and the SSCB. Particular emphasis was placed around the SSCB’s commitment to drive Think Family practice forward and the important role of the VCSE and the duties placed upon them in safeguarding children. The workshop enabled the network to consider how the SSCB might help them in developing and building upon their own practice in safeguarding children and how blocks and inhibitors might be overcome.

### 8.7 Listening to children

SSCB encourages its partners to listen and respond to the views and wishes of children and their families, both in their daily work and in service planning and development.

Whilst there are clearly a number of areas of good practice, there are also improvements needed, for example in the context of child protection activity.

In its ‘**Reinspection of services for children in need of help and protection, children looked after and care leavers’ (January 2018)**, Ofsted noted that:

*Too few children benefit from access to advocacy for child protection conferences, and this is a missed opportunity to maximise their voice and understand the experiences of children in need of protection. (Recommendation)*

In Somerset, advocacy for children who are in need of protecting and Independent Visitors for children looked after is provided by a charity called **Route 1 Advocacy**. When this service was initially commissioned, a requirement for 70 independent visitors and provision of advocates to represent children **550 times** in Child Protection Conferences was envisaged. Since then, referrals for this service have been embraced by social workers who recognise the paramountcy of enabling children to access this type of support which ensures their voices are heard. As a result, **Route 1 Advocacy** has reached and surpassed these figures.

This level of provision translates into 30.7% of children over the age of 4 years who are the subject of a child protection conference receiving support from an advocate. In addition, 76 children have been matched with an Independent Visitor over the last year and a number of further referrals (circa 37) were pending matches at the end of the reporting year.

These figures suggest that the initial commissioning was not aspirational enough. Whilst a business case will be submitted in the new financial year to request expansion of this service, alternative ways of ensuring independent representation will be considered. This includes further promotion of the children and young people's application '**Mind of My Own**' (MOMO), so that the success of the impact of MOMO for Children Looked after can be replicated for children in need of protection.

The Board was informed that further voice of the child work is planned for 2018/19 in capturing children's views and experiences relating to safeguarding, through school pupil surveys – this has been agreed as a new standard expectation within the governor safeguarding self-assessment audit process to ensure children's voice and influence is used to improve services that support them.



## 9. Priorities for the SSCB 2018/19

<b>Strategic priority 1: Early Help</b>	
<b>Outcome</b>	<i>Children and families receive good quality and timely multi-agency help to keep children safe and promote their wellbeing.</i>
<p><b>We will move from ‘process’ to ‘impact’ and continue to embed Early Help arrangements by:</b></p> <ul style="list-style-type: none"> <li>• <b>evaluating the effectiveness</b> of partners’ delivery of their <b>Early Help responsibilities</b>;</li> <li>• <b>assessing the impact</b> of Effective Support Guidance and the <b>threshold decisions</b> on children and young people’s outcomes (including use of the EHA, step up and step down arrangements and resolving professional differences);</li> <li>• <b>understanding the views of children and parents/carers</b> who receive early help support and services;</li> <li>• <b>assuring ourselves</b> that Early Help arrangements are embedding and are effective.</li> </ul>	
<b>Strategic priority 2: Multi-agency Safeguarding</b>	
<b>Outcome</b>	<i>Children are safeguarded through multi-agency partnership working.</i>
<p><b>We will evaluate the effectiveness and impact of safeguarding arrangements in Somerset by:</b></p> <ul style="list-style-type: none"> <li>• <b>scrutinising</b> data and <b>monitoring</b> the quality of agency engagement and compliance with statutory child protection (CP) procedures and local guidance (effective support and resolving professional differences);</li> <li>• <b>assessing</b> impact of the partnership's work with children with additional needs and assure ourselves that the system performs effectively on their behalf;</li> <li>• <b>engaging with practitioners</b> through audit, safeguarding conversations and other means;</li> <li>• <b>strengthening learning</b> from both Adults and Children Board reviews;</li> <li>• <b>assessing impact</b> of Think Family approaches to safeguarding vulnerable children;</li> <li>• <b>understanding the views of children and parents/carers</b> who experience Somerset’s CP processes.</li> </ul>	



### Strategic priority 3: Neglect

**Outcome** *Children who are experiencing or at risk of neglect are identified and safeguarded*

#### We will continue to raise the profile of and tackle neglect by:

- **improving** practitioners' knowledge and skill base in responding to neglect, the issues surrounding it and practical approaches for dealing with it;
- **promoting and embedding** the multi-agency neglect strategy, practitioner guidance and the Somerset neglect action plan and assuring ourselves of its impact in improving children's lives;
- **assessing the effectiveness** of current practice, including early identification and intervention in response to neglect, based on understanding gained from SCR and other reviews;
- **understanding** children's lived experience of neglect in order to improve practice;
- **sharing learning** from reviews and practice audits.

### Strategic priority 4: Child Exploitation

**Outcome** *Children who are at risk of, or subject to, all forms of exploitation and abuse (including children missing from home, care or education) are identified and safeguarded*

#### We will work with partners to:

- **strengthen leadership** across the partnership and seek assurances that children vulnerable to exploitation receive an effective response to protect them (home educated);
- **assure ourselves** that the quality of response to children who go missing is consistently good;
- **assess impact** of the strategy and action plans for responding to child exploitation;
- **evaluate** the effectiveness of partners' arrangements for identifying, assessing and tackling child exploitation, (including training and use of the Champion role);
- **understand** the views and experiences of children and families vulnerable to / experiencing exploitation, particularly those with multiple vulnerabilities, such as home educated children.

## 10. Assessment of the effectiveness of the safeguarding arrangements in Somerset

Overall, the Somerset Safeguarding Children Board (SSCB) partners have continued to work together improve their safeguarding arrangements amidst a changing national context for safeguarding, reduced leadership capacity and shrinking resources. The response to challenges within individual agencies has sometimes had an impact across the partnership, resulting in – at times – challenging conversations between partners and at the Board.

Partners have strengthened their response to children and young people, including providing help and support earlier, but more needs to be done to ensure that service responses are consistent in quality and timeliness, and effective in their impact on the safety and wellbeing of children. Key to this will be listening and responding more systematically to what children and their families are saying works for them.

Midway through the year, Ofsted also reported as follows:

*‘Since the last inspection in 2015, when Somerset children’s services were judged as inadequate overall, the local authority has made steady progress in improving the quality of services that children and young people receive. Senior leaders have worked effectively with an improvement partner, and they have created a culture of openness and willingness to learn that supports further improvement.’*

A brief analysis of the effectiveness of local arrangements with examples of work carried out by the partnership is set out below.

### **There is regular and effective monitoring and evaluation of multi-agency frontline practice to safeguard children**

The Quality and Performance subgroup and its multi-agency audit groups have continued to scrutinise practice on behalf of the Board, providing both learning and appropriate challenge. Safeguarding conversations around multi-agency case work and Board member observations of child protection processes have provided an insight into practice issues, what works well and where gaps might exist.

### **Partners hold each other to account for their contribution to the safety of children.**

Single agency assurance reports were received throughout the year and scrutinised by the Board. Full Board meetings continued to be held quarterly, and the work of all multi-agency subgroups was scrutinised and monitored by the

partnership. Progress against the SSCB business plan was reported at Board meetings with risks and exceptions flagged to partners, prompting agency challenge where necessary. The SSCB Governance Group monitored actions taken to address issues and risk.

**Safeguarding is a demonstrable priority for all the statutory members.**

SSCB partners have continued to demonstrate a commitment and drive to improve children’s safeguarding through their attendance and engagement in the Board itself, and with its subgroups and task groups. When attendance and contributions have been poor, partners have been appropriately challenged by peers and the Independent Chair and relevant challenges made to senior executives.

**There is a strong learning and improvement framework in place.**

The Partnership has facilitated and resourced a wealth of opportunities for learning which are effective, highly valued by practitioners and have a demonstrable impact on improvement. Practitioner engagement in SSCB training, roadshows and learning reviews of cases where agencies did not work well together remains high. Practitioners value the face to face learning opportunities provided and also the learning communications such as the learning bulletins and SSCB newsletters and messages through social media. Download statistics for learning review reports, learning bulletins and newsletter continue to incrementally increase demonstrating practitioners’ commitment to learn from

practice and improve it. Two serious case reviews were published and one initiated. Serious incidents were scrutinised by the learning and improvement subgroup, to tease out opportunities for learning and improvement. Safeguarding conversations – a form of appreciative enquiry developed by the Board – are well supported and provide a valued opportunity for the Board members to consider good and successful practice

**The Board ensures high quality policies and procedures are in place.**

Policies and procedures are shared across most of south west England, and were monitored, evaluated and updated by the Board. The quality and impact of policies upon practice were routinely considered as part of learning reviews and audits. Where weakness were identified, policies were reiterated in order to embed them further throughout the year. Particularly, effective support for children and families guidance, resolving professional differences guidance and pre-birth guidance were strengthened throughout the year. Where gaps were identified in guidance for practitioners, the subgroups worked together with practitioners to develop guidance and help strengthen their responses to safeguarding concerns; guidance was developed around neglect and also child exploitation across the reporting year.

**The Board is working to understand the nature and extent of the local issues in relation to children missing and children at risk of sexual exploitation.**

The SSCB Child Exploitation subgroup continued to address this as a high priority because of the identified need for significant improvement. The subgroup has actively reshaped and expedited action plans to address strategic and operational deficits in the multi-agency response to child exploitation. There has been ongoing scrutiny and challenge to partners to ensure the progress against the action plans maintains momentum and child exploitation remains a multi-agency priority.

**Case audits, including joint case file audits, are used to identify priorities.**

Board members, practitioners and managers have continued to be involved in multi-agency audits of case work. Audit findings along with outcome focused action plans are monitored by the SSCB and exceptions routinely reported to the Board to highlight where action or intervention by partners may be required. Findings inform priority setting by the Board, as well as the more detailed actions that need addressing within individual agencies.

**The SSCB is an active and influential participant in informing and planning services**

Through strategic involvement with other partnership boards in Somerset and through analysis of SSCB led self-assessment (S11 and S175/157) the SSCB has continued to challenge and inform partners and providers of where actions need to be taken to improve service planning and provision. The SSCB uses its statutory powers to influence where action needs to be taken by other partnerships to improve children's safeguarding and promote their wellbeing. The annual report and serious case reviews are presented to individual agency leadership groups and to other multi-agency partnerships, leading to constructive responses in a number of areas.

**The Board ensures sufficient, high quality multi-agency training is available and evaluates impact and effectiveness.**

The SSCB has maintained oversight and responsibility for multi-agency safeguarding children training for designated safeguarding leads. The SSCB training and development subgroup routinely evaluates impact of training output across the partnership, which supports the Business Plan priorities. The SSCB training and development strategy is closely aligned to the learning and improvement framework and associated activity. This is a key strength of the Board

## Appendix A: SSCB Partner Contributions and Budget

The overall SSCB budget included two components including a **core budget**, which includes business unit salaries (excluding training) and Board running costs, and the SSCB **training budget** which included training manager and administrative salaries and training related running costs, expenditure and income.

Partner agencies continued to contribute to the SSCB's budget for 2017/18, in addition to providing "in kind" resource including staff time and the provision of 'free' training venues.

At the outset of 2017/18 agency contributions reduced in quarter two following reduction in resource allocation of the CCG's child death review manager.

### Agency contributions 2017/18

Agency	Actual contribution 2017 / 2018 (£)
Avon and Somerset Constabulary	19,600
Somerset Clinical Commissioning Group	30,350
National Probation Service (South West)	1,440
Community Rehabilitation Company (Somerset Local delivery unit)	1,010
Somerset County Council	140,210
CAFCASS	550
Taunton Deane and West Somerset District Council	1,600
South Somerset District Council	1,600
Mendip District Council	1,600
Sedgemoor District Council	1,600
<b>Total Income</b>	<b>199,560</b>

This financial year's overall combined training and core budget, had an outturn of **£5,145 surplus**. This was due in part to a 50% reduction in costs to the Section 11 audit tool negotiated by the Business Manager and the delivery of additional training courses in response to demand, which resulted in excess of planned generated income.

## SSCB Expenditure 217/18

SSCB Core budget	Expenditure 2017/18 £	Under/ overspend (variance) £
Salaries	203,230	13,980
Running costs	13,135	(1,565)
Serious case reviews	14,853	(8,147)
Total running expenses	27,988	(9,712)
Total core expenditure	231,218	4,268
Core Income	209,210	17,740
Core SSCB overspend (underspend)		22,008

The outturn of the SSCB, partner funded **core budget** was a planned overspend of £22,008.

### SSCB Training Budget

This financial year saw for the first time the 100% transition of training salaries (for the 1.0 FTE SSCB training manager and the 0.8 FTE training administrator and 0.2 FTE apportioned time from SCC finance admin support), into the £0 'standalone' SSCB training budget.

The fully traded training budget continued to work extremely well throughout the year and exceeded income targets. The surplus generated was recycled back into the Board's core budget to support priority areas and to enable the partnership to deliver further flexible multi-agency safeguarding training events in response to Board priorities and learning from the serious case review, 'Fenestra'.

The income achieved from training continued to enable the partnership to deliver a responsive programme of multi-agency safeguarding training and fully subsidise a number of multi-agency practitioner learning events to broaden the reach of learning from reviews. Income from multi-agency training also offset 100% of SSCB training related salaries and associated costs. The net surplus of **£27,153** was recycled back into the Boards work and used to off-set the core SSCB planned budget pressure.

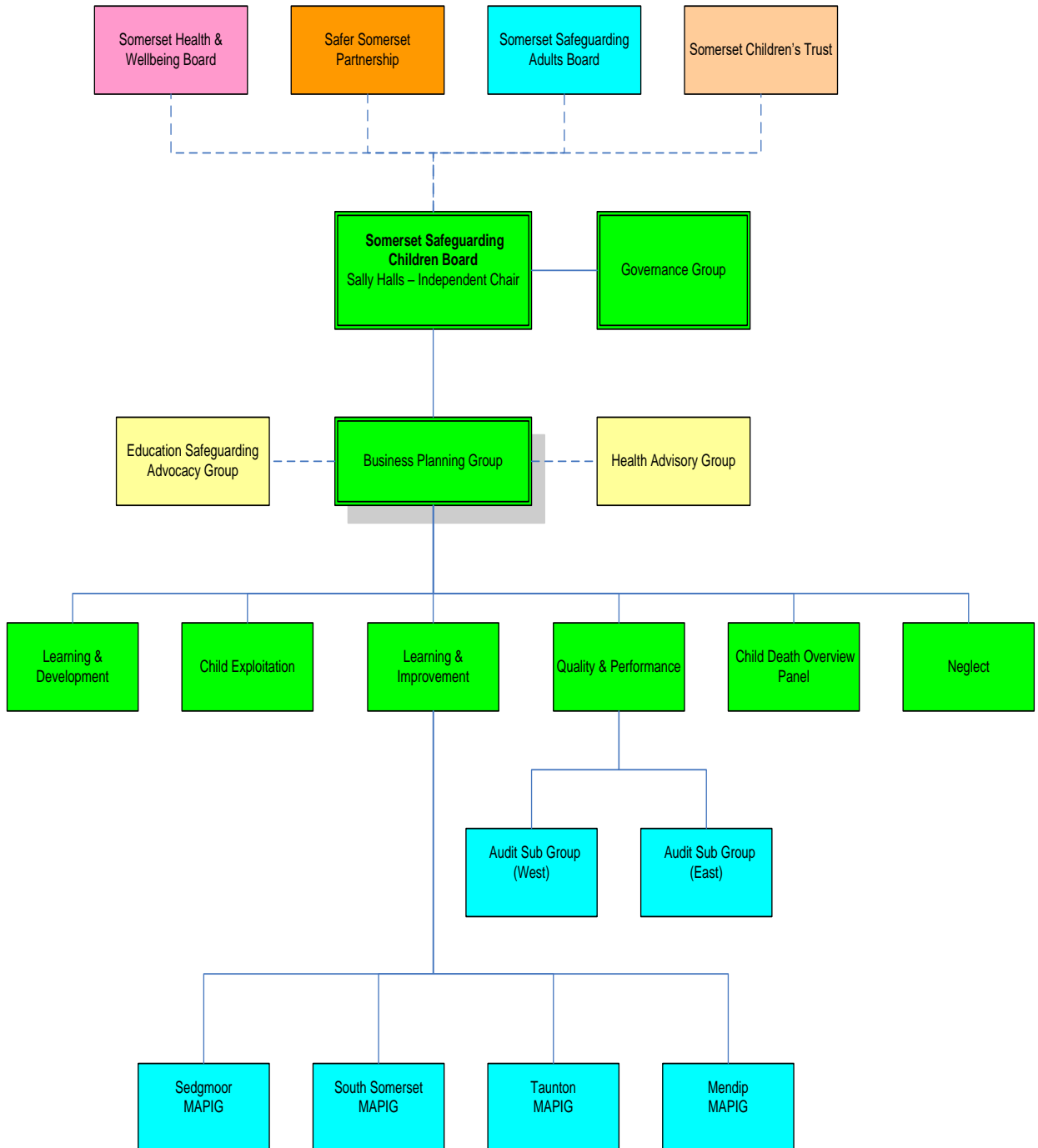
### Training expenditure 2017/18

Training budget	Expenditure 2017/18 £	Under/ overspend (variance) £
Training Salaries (training manager 1.0FTE, admin/finance 1.0 FTE)	71,470	4,470
Training & conference costs	28,897	(10,203)
Training income	(127,520)	(21,420)
Training overspend (underspend)	(27,153)	(27,153)
<b>Overall SSCB</b> overspend (underspend)	(5,145)	

The outturn figure for the SSCB budget overall in 2017/18 was **£5,145** underspent. This figure was carried forward to support the Board's ongoing SCR and Learning review work.

# Appendix B: SSCB Structure, Membership and Subgroups

## SSCB Structure





## SSCB Membership 2017/18

<b>Name</b>	<b>Role and agency</b>
Mark Barratt	Assistant Director – Safeguarding, Care and Quality Assurance
Alison Bell	Consultant in Public Health, Public Health
Peter Brandt	Assistant Chief Officer, Community Rehabilitation Company
Sandra Corry	Director of Quality, Safety and Engagement, Somerset Clinical Commissioning Group
Maria Davis	Designated Nurse for Safeguarding Children and Children Looked After, Somerset Clinical Commissioning Group
Dave Farrow	Head of Outcomes and Sufficiency, Somerset County Council
Trudi Grant	Director of Public Health, Somerset County Council
Sally Halls	Independent Chair, Somerset Safeguarding Children Board
Simon Lewis	Assistant Director, Taunton Deane Borough Council
Shelagh Meldrum	Director of Nursing and Elective Care, Yeovil District Hospital NHS Trust
Pauline Newell	Service Manager, CAF/CASS
Frances Nicholson	Cabinet Member for Children and Young People, Somerset County Council
Kevin O'Donnell	Community Member, Somerset Safeguarding Children Board
Richard Painter	Head of Safeguarding, Somerset Partnership NHS Foundation Trust
Hayley Peters	Executive Director of Patient Care, Taunton and Somerset NHS Foundation Trust
Mike Prior	Superintendent, Avon and Somerset Constabulary
Penny Quigley	Community Member, Somerset Safeguarding Children Board
Nick Rudling	Deputy Safeguarding Lead, NHS England South (South West)
Liz Spencer	Assistant Chief Officer, National Probation Service
Tom Whitworth	Strategic Manager, Vulnerable Young People
Claire Winter	Deputy Director Children and Families. Somerset County Council
Julian Wooster	Director of Children's Services, Somerset County Council

## Appendix C: Safeguarding in Education

Support Services for Education ran a successful conference in the reporting year, on dealing with on-line issues for providers. A second conference is expected in the new financial year to consider harmful sexual behaviour, recognising the changes being brought in through Keeping Children Safe In Education 2018 and Working Together.

South West Grid for Learning (SWGfL) are important members of our work with providers and with partners ensure we have the most recent on-line safety advice available for our education providers. Each year SWGfL present to the SSCB Education Advisory Group on current issues.

The Team Around the School (TAS) model of working was rolled out across Somerset and continued to evolve in the reporting year. It is anticipated that this model will play a key role in ensuring that children and young people at risk of missing out on education through exclusions, the use of part time timetables etc, with the attendant safeguarding risks that that brings, are identified early and appropriate support put in place.

There was very high movement of staff and Head teacher turnover in the primary sector holding the Designated Safeguarding Lead (DSL) role were noted during the reporting year; some schools were susceptible to non-compliance operating without a DSL. Interim arrangements were put in place with support from other local schools and the Education Safeguarding Advisor (ESA).

Single Central Registers 'drop-ins' were initiated and will be developed further in the forthcoming year by the ESA. Demand for this support remained high and additional capacity to support this work will be sought in the new financial year.

A significant number of telephone queries to the ESA related to safer recruitment, the 175/157 self-assessment audit or Single Central Record queries. An emerging theme throughout the year was requests for advice on issues around peer on peer allegations, this has been reported to the wider partnership through the SSCB to augment a multi-agency approach to respond to these themes.

From Quarter three in the new financial year in 2018, the new requirements from government and Ofsted will expect to see clear programmes of statutory and proactive in-house safeguarding training, evidencing that all education providers and staff are aware of local Somerset polices and guidance for safeguarding. ESA will work closely with the SSCB training manager to respond to these demands.

The ESA developed a twitter account and reached 200 followers. The impact has resulted in improved reach to DSLs and sharing of good practice and useful relationships with ESAs in other areas.

Work was undertaken in the reporting year to purposefully capture children's voice and views on the safeguarding issues affecting them - the ESA provided schools with quizzes and surveys for this purpose, this will be developed further in the forthcoming s175 audit, this will now be a requirement on

schools to do one pupil survey a year purely around safeguarding issues.

Schools reported that many of their recorded concerns related to children and young people with SEND and disability. Other areas of vulnerability are children missing education, elective home education, 16-18 year olds on private apprenticeships and 19 year olds still on school rolls. These are recognised risks and have prompted further focus for development in the forthcoming year.

An analysis of education referrals to the Early Help Hub and First Response shows that despite access to a range of advice and support available to schools and settings as detailed in this section of the report, practitioner confidence around early help decision making remained relatively low and requires further impetus. This is an area of work that we will be focusing on through the Education and Early Years Safeguarding Advisers, TAS and other support mechanisms in the forthcoming year.

The coordination and delivery of safeguarding advice, guidance and support to early years settings and schools is delivered through the Commissioning Manager for Safeguarding and Children Missing Education who is part of Children's Services. This is also supported by the Education and Early Years Safeguarding Advisers (ESA and EYSA) who are part of Support Services for Education (SSE), the traded unit for education services, for Somerset County Council.

The Commissioning Manager chairs the Education Safeguarding Advisory Group which met on a regular basis across 2017/18 and is well attended with representation from:

- Local Authority Education Safeguarding Officers
- Somerset Association of Secondary Heads (SASH)
- Somerset Association of Primary Headteacher Officers (SAPHTO)
- Special Education Needs – Somerset Expertise (SENSE)
- Independent Schools
- Further Education Colleges
- Early Years
- getset
- Police
- Health
- South West Grid for Learning (SWGfL)

The group facilitated important communications across education providers on all statutory safeguarding duties and compliance with SSCB Policies and procedures. This included ensuring that learning from serious case reviews, domestic homicide reviews are embedded and that education continued to be an integral part of the SSCB.

The Education Safeguarding Advisor and Early Years Safeguarding Advisor met regularly with groups within the sectors and relevant DSLs across Somerset. The advisors established several communications methods to keep providers updated, ensuring they have the fullest and most

recent updates and are consistently clear on their safeguarding duties and responsibilities.

All safeguarding complaints made direct to Ofsted were addressed by education staff and recorded on the i-casework recording system. This ensured that the LA both challenged and supported providers about whom concerns were raised and that issues were dealt with swiftly. Since September 2017 there were circa 80 contacts from Ofsted covering a range of issues including bullying and health and safety

concerns. This aligned with the national trend of increasing numbers of complaints being sent directly to Ofsted, which they in turn passed to LAs where it was felt appropriate.

SCC highlighted concerns to Ofsted about the triage process to communications they receive, following cases where complainants circumvented local arrangements for resolving concerns, which were not subsequently referred back to them.

## Appendix D: SSCB Attendance by agency 2017/18

Agency		Quarter 1	Quarter 2	Quarter 3	Quarter 4
SSCB	Chair	Yes	Yes	Yes	Yes
	Business manager	Yes	Yes	Yes	Yes
SCC	Children's Services	Yes	Yes	No	Yes
	Children's Social Care	Yes	No	No	Yes
	Public Health	Yes	Yes	No	No
	Education	No	Yes	No	Yes
Youth Offending Team		Yes	Yes	Yes	No
Avon and Somerset Police		Yes	Yes	Yes	Yes
Health	Clinical commissioning group	Yes	Yes	Yes	Yes
	Somerset Partnership NHS Foundation Trust	Yes	Yes	Yes	Yes
	Yeovil District Hospitals Foundation Trust	Yes	Yes	No	No
	Taunton and Somerset NHS Foundation Trust	No	Yes	Yes	Yes
National Probation Service		Yes	Yes	Yes	Yes
CRC		No	No	No	No
CAFCASS		No	No	Yes	No
NHS England		No	No	No	No
Community members		Yes	Yes	Yes	Yes
		Yes	Yes	Yes	Yes
District Councils		Yes	Yes	Yes	Yes
Number of attendees		14	15	12	13
Percentage attendance		73.7	78.9	63.2	68.4

## Appendix E: Assessing the effectiveness of child safeguarding and promoting the welfare of children in Somerset

### Section 11 audit

Section 11 of the Children Act 2004 places duties on a range of organisations, agencies and individuals to ensure their functions, and any services that they contract out to others, are discharged having regard to the need to safeguard and promote the welfare of children. The focus of this audit is to establish the degree of compliance with and understanding by each individual agency of these responsibilities. It takes the form of an annual self-assessment, supplemented in 2017-18 for the first time by a number of 'peer challenge' workshops to assess the quality of each agency's self-assessment. 10 agencies took part in these workshops.

A multi-agency task and finish group is planned for August 2018 to review and revise the section 11 audit for 2018-19, which will be issued for completion across the partnership in October/November 2018. Peer Challenge workshops will then take place early 2019.

### Section 11 standards

5.1 Service development plans are informed by the views of children and families
6.1 Individual case decisions are informed by the views of children and families
8.3 Appropriate staff and volunteers are trained to recognise signs of abuse and neglect
8.4 Outcomes and findings from reviews and inspections are disseminated to appropriate staff and volunteers
9.1 The organisation has a recruitment policy in effect which ensures professional and character references are always taken up
9.2 Any anomalies are resolved
9.3 Identity and qualifications are verified
9.4 Where appropriate enhanced or standard DBS checks are completed on all those staff and volunteers who work primarily or directly with children and young people and their managers
9.5 Face-to-face interviews are carried out

<b>9.6</b> Previous employment history and experience is checked
<b>9.7</b> Employees involved in the recruitment of staff to work with children have received training as part of the "safer recruitment training" programme
<b>10.1</b> The organisation has identified principles of working with children and their families for all staff to work within
<b>10.2</b> Staff understand when to discuss a concern about a child's welfare with a manager
<b>10.3</b> Staff understand the threshold for making a referral to Children's Services or raising an Early Help Assessment
<b>10.4</b> Staff have access to inter-agency guidance and procedures
<b>10.5</b> Staff participate in multi-agency meetings and forums to consider individual children
<b>10.6</b> Contractors to the organisation who work with Children and are delivering statutory services are Section 11 compliant and have been audited. Other contracts require the organisation to achieve Safeguarding Standards
<b>11.4</b> The organisation has in place a programme of internal audit and review that enables them to continuously improve the protection of children and young people from harm or neglect

### **Section 11 peer challenge workshops**

In order to quality assure the section 11 returns, the Quality and Performance subgroup devised a process in the form of peer challenge workshops.

10 agencies underwent a peer challenge workshop:

- Somerset Partnership NHS Foundation Trust (pilot workshop)
- Avon and Somerset Constabulary
- Somerset Clinical Commissioning Group
- Devon and Somerset Fire and Rescue Service
- Somerset County Council Education Commissioning
- Somerset County Council getset services
- National Probation Service
- Taunton Deane and West Somerset District Council

- Somerset County Council Targeted Youth Support and Youth Offending Team
- Yeovil District Hospitals NHS Foundation Trust

The peer challenge workshops focussed on the standards within the audit that relate directly to SSCB Business priorities.

Many agencies from across the partnership provided “peer challengers” in order to make these workshops truly multi-agency.

The feedback from these workshops was overwhelmingly positive (from both “challenged” and “challenging” agencies), and did result in the moderation of grading for several standards across agencies, as seen in figure 1 below:

**Figure 1: Result of Section 11 moderation (peer challenge) workshops**

Agency	Result of moderation			
	Grade unchanged	Grade lowered	Grade increased	Not applicable/ not scored
<b>Totals</b>	<b>79</b>	<b>24</b>	<b>5</b>	<b>2</b>
<b>Percentage</b>	<b>72%</b>	<b>22%</b>	<b>5%</b>	<b>1%</b>

### Section 175/157 audit

The equivalent to the section 11 standards in the education sector is set out in section 175 of the Education Act 2002, and for independent schools, under standards issued under 157 of the same Act,

The Section **157/175** Governor Safeguarding Audit ran its second year of self-assessment returns during the year, using the online self-assessment tool, ‘*enable*’. The reporting year saw a 100% completion rate for the self-assessments, which was extremely positive. Actions identified from the self-assessment included the need to improve consistency of Early Help application across the education system, and improvements needed in the quality of schools’ responses to keeping children safe, with emphasis on safeguarding leadership within settings.

### Appendix F: Multi-agency audit programme

Practitioners and managers working with families are routinely involved in multi- agency practice audits. In 2017/18 four multi-



agency case work audits took place.

The audits resulted in outcome-focused action plans, written and monitored by the Quality and Performance subgroup, to assure the Board around the quality of practice and standards, and to track and evidence improvements in frontline practice. The topics and findings are summarized in table X below.

<p><b>Q1 – June 2017</b></p>	<p><b>Neglect</b> 7 case files audited, children subject to a child protection plan for the category of neglect, focusing on work prior to the Initial Child Protection Conference</p>
<p><b>STRENGTHS:</b></p> <ul style="list-style-type: none"> <li>• The parents’ capacity to change their parenting was assessed, and the length of time the child had experienced neglect, and the cumulative effect of that neglect was taken into account at strategy discussions and Initial Child Protection Conferences (ICPC).</li> <li>• At the point of strategy discussion and ICPC the information sharing was appropriate, and the impact of neglect was considered.</li> </ul>	
<p><b>KEY LESSONS:</b></p> <ul style="list-style-type: none"> <li>• The voice of the child was not represented by advocacy in any of the ICPCs in the sample.</li> <li>• In 4/7 cases there was no evidence that child protection plans had been shared with children, and reports were not consistently shared with parents prior to conferences.</li> </ul>	
<p><b>IMPACT:</b></p> <ul style="list-style-type: none"> <li>• Promotion of advocacy has resulted in a steady rise in the percentage of referrals for an advocate. In April 2018 45% of children received a referral for an advocate for an ICPC compared to 32% the previous year.</li> <li>• There is an expectation that Social Workers will feedback to children about the outcome of the conference as part of their direct work with them. Chairs include a question in Conference to establish how and when this feedback will be given to the child.</li> </ul>	

<b>Q2</b> <b>September</b> <b>2017</b>	<b>Child Sexual Exploitation</b> 8 cases audited, where the child was known to be at risk of, or exposed to, child sexual exploitation
<b>STRENGTHS:</b> <ul style="list-style-type: none"> <li>• A mixed picture overall but the audit identified that risks were correctly identified and plans put in place to address the risks.</li> </ul>	
<b>KEY LESSONS:</b> <ul style="list-style-type: none"> <li>• Some plans were not effective at reducing the risks to the child, particularly for vulnerable children who had high levels of need and complex family circumstances.</li> <li>• Professionals working with children or their families were not always clear about developments because they were not included in planning. Sharing of information across the partnership was inadequate, for example, it was not shared with CAMHS that a young person was at risk of CSE, and the date of a court case was not shared with BASE.</li> <li>• In one case the language used to describe a vulnerable young person's behaviours implied that s/he was to blame for the CSE.</li> </ul>	
<b>IMPACT:</b> <ul style="list-style-type: none"> <li>• The learning bulletin, TUSK, highlighted to all agencies of the importance of using non-blaming language. TUSK also reminded staff that if they were working with a child they should expect to be involved in planning, and that if they did not receive invitations to meetings, or notes from meetings, these should be requested and the 'Resolving Professional Differences' protocol could be used if there were difficulties.</li> <li>• The importance of using non-blaming language is embedded in the child exploitation of Working Together training, and work is in progress to update the CSE training to include all the findings from Fenestra and recent national cases.</li> </ul>	

<b>Q3 December 2017</b>	<p><b>Multi-agency Early Help</b> 8 cases were audited which examined multi-agency practice with families prior to a contact being made with Children's Social Care. Four of these cases were assessed to be level 4 and further work followed, four were deemed not to meet the threshold.</p>
<p><b>STRENGTHS:</b></p> <ul style="list-style-type: none"> <li>• There was escalation in one case, when a delay in referring was discussed with a manager. Otherwise the Resolving Professional Differences Protocol was not needed or used.</li> <li>• Seven of the referrals were appropriate.</li> <li>• In seven of the cases First Response had communicated the outcome to the referring agency.</li> </ul>	
<p><b>KEY LESSONS:</b></p> <ul style="list-style-type: none"> <li>• There were missed opportunities to identify the risks to the children and complete Early Help Assessments (EHA).</li> <li>• For the eight referrals, only 4 EHAs were submitted.</li> <li>• All the EHAs had missing sections, with no reason given for the missing sections</li> </ul>	
<p><b>IMPACT:</b></p> <ul style="list-style-type: none"> <li>• Learning points were communicated through the SSCB learning bulletin.</li> <li>• An Early Help Workshop has been planned. This will address professionals' understanding of early help, and the EHA form.</li> <li>• Revision of EHA may follow the EHA workshop. It is planned to release updated guidance to reflect the points made.</li> </ul>	

<b>Q4 March 2018</b>	<p><b>Multi-agency work on child protection plans</b> 8 cases were audited, considering the work leading up to a Review Child Protection Conference, including Core Groups, looking at the multi-agency engagement with the Plans and the progress made.</p>
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**STRENGTHS:**

- The voice of the child was represented at two of the conferences, with a report and the attendance of the advocate.
- The original risks to the child were clearly outlined in five of the RCPCs.
- With the exception of one RCPC where the CP Plan had been completed and the plan discontinued, all of the meetings focused on risk reduction.
- The police provided reports to all of the RCPCs, but did not attend any of them. A Joint working protocol is being agreed between police and children's social care to clarify when Police will attend RCPCs.

**KEY LESSONS:**

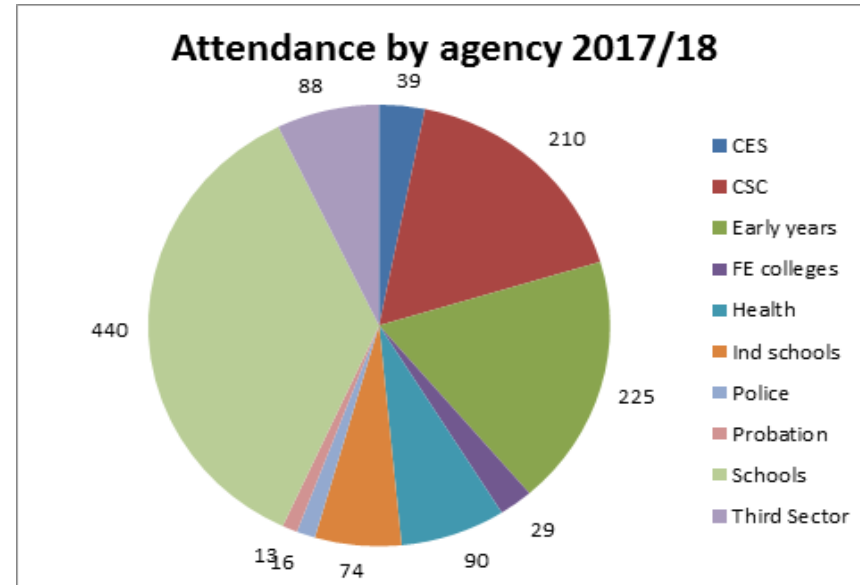
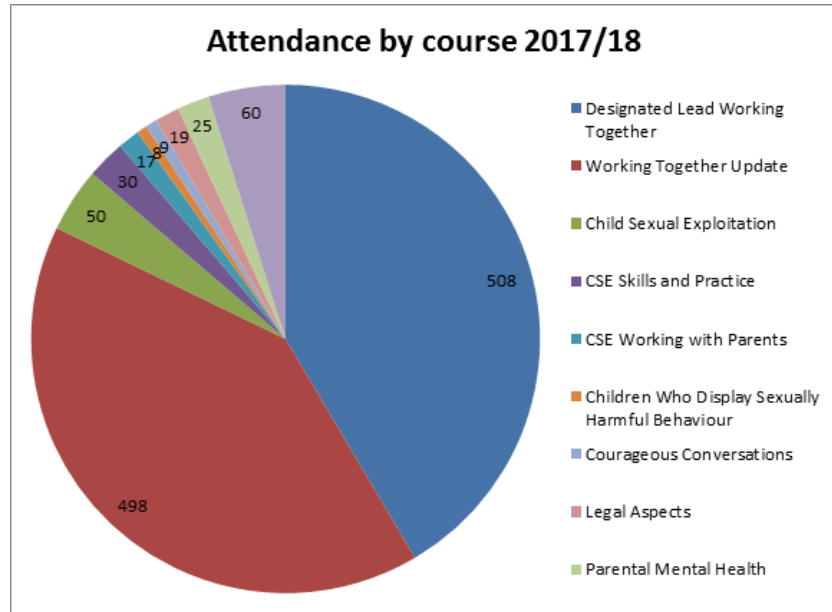
- Only 2 GPs sent information to the RCPC. One sent a letter rather than completing what was described as an "unwieldy conference report template", and the other information was handwritten. No GPs attended an RCPC. For one child there was no school nurse or hospital involvement so there was no input from any of the health agencies.
- In one meeting, the school was represented by the PFSA. It is more appropriate for the Head or Designated Safeguarding Lead to attend.

**IMPACT:**

- Work is planned to ensure that core groups routinely discuss and record scaling at meetings, to reflect the current level of safety for the child.
- Work is planned to improve the level of GP engagement with child protection conferences, and to promote the attendance at conference of the class teacher or Designated Safeguarding Lead

## Appendix G: Multi-agency training attendance 2017/18

Attendance by course and by agency 2017/18													
	CES	CSC	Early years	FE colleges	Health	Indep schools	Police	Probation	Schools	Third Sector	Totals	%	
<b>Designated Lead Working Together</b>	10	99	121	12	14	36	8	1	174	33	508	<b>41.5</b>	
<b>Working Together Update</b>	17	92	87	13	47	33	0	1	194	14	498	<b>40.7</b>	
<b>Child Sexual Exploitation</b>	2	2	3	0	4	0	2	11	13	13	50	<b>4.1</b>	
<b>CSE Skills and Practice</b>	1	2	0	0	2	1	3	0	9	12	30	<b>2.5</b>	
<b>CSE Working with Parents</b>	0	6	3	0	2	0	2	0	0	4	17	<b>1.4</b>	
<b>Children Who Display Sexually Harmful Behaviour</b>	0	1	0	0	0	1	1	0	3	2	8	<b>0.7</b>	
<b>Courageous Conversations</b>	2	0	0	0	5	0	0	0	2	0	9	<b>0.7</b>	
<b>Legal Aspects</b>	2	0	1	1	9	2	0	0	2	2	19	<b>1.6</b>	
<b>Parental Mental Health</b>	2	4	6	0	7	0	0	0	6	0	25	<b>2.0</b>	
<b>Safer Recruitment</b>	3	4	4	3	0	1	0	0	37	8	60	<b>4.9</b>	
	39	210	225	29	90	74	16	13	440	88	1224	<b>100.0</b>	
<b>Percentages</b>	<b>3.2</b>	<b>17.2</b>	<b>18.4</b>	<b>2.4</b>	<b>7.4</b>	<b>6.0</b>	<b>1.3</b>	<b>1.1</b>	<b>35.9</b>	<b>7.2</b>	<b>100.0</b>		



## Appendix H: Early Help evaluation from EHSCB

The Ofsted inspection that took place during November 2017 found that early help services in Somerset have improved and required further integration with partners to increase its capacity. The local authority had also not systematically evaluated the impact of the early help offer on meeting the needs of children and their families.

### What was done?

- The ‘**Effective Support for Children and Families in Somerset**’ (thresholds guidance) was refreshed and continued to become embedded and part of professionals’ daily toolkit.
- The Early Help Advice Hub has been established and co-located with the Children’s Social Care First Response Team, continuing to reinforce the early help process by providing advice, logging Early Help Assessments (EHA) and triaging EHA’s for the getset service.

### Team around the school (TAS)

TAS multi-agency meetings were put in place across the whole of Somerset. The principles of information sharing and identifying needs early are becoming more adhered to and feedback from partners is that the multi-agency approach to early help is beneficial.

Multi-agency attendance has been closely monitored and the table shows average attendance over the period Sept 2016 to May 2017.

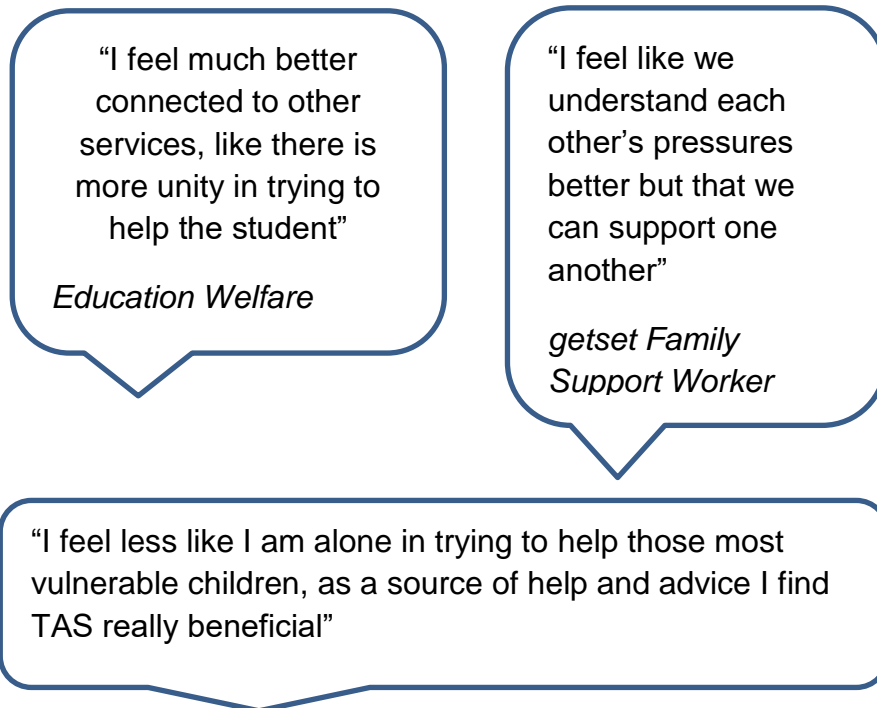
Organisation	Average attendance at TAS (Countywide)
School staff	
Designated safeguarding lead	98.2%
SENCO	86.7%
Parent & Family Support Adviser (PFSA)	97.7%
Other pastoral support	69.2%
Representation from feeder primary/infant schools	83.1%
Police	
PCSO	69.1%
One/Inclusion team lead	21.0%
Children’s Social Care	35.6%
Support Services for Education	
Educational Psychology	12.9%
Education Welfare Officer	75.5%
getset	
Early help officer	89.4%
Family support worker	96.6%
Housing association/provider	70.4%
School nurse/Health visitor	79.2%
Primary Mental Health Link Worker (CAMHS)	17.4%
Targeted Youth Service (TYS)	10.2%
Youth Offending Team (YOT)	12.6%
Pathways to Independence (P2i)	9.3%
Voluntary Sector Organisations	5.9%

## So what?

In the spring term 2017 an evaluation was undertaken of TAS in 19 of the 29 schools (65.5%). The following findings were made:

### Multi-Agency Working

- 95% of partner agencies are starting to see the benefits of regular multi-agency meetings.



- 85% of schools are reporting that actions are being taken more swiftly by other agencies.
- 87.5% report good spirit in holding partners to account.
- 97% felt it was a good way of keeping up to date with changes in other agencies and networking.
- 80% of TAS chairs have oversight of children from other schools when those school heads are not in attendance. (Issues sometimes occur where TAS is run in conjunction with One team operations where the focus and criteria may be split between school/community).
- 96.5% report strengthened relationships between partners – discussions help to understand thresholds, roles, responsibilities and accountabilities.
- 100% of those that have adopted it found it helpful to use the Behaviour and Vulnerability Profiling Tool (BVPT) though it should be noted that this is an extremely small sample as only 6 of the 29 schools are using the BVPT.
- 100% of TAS coordinators agreed that the meeting helped to reinforce the need to complete Early Help Assessments to start building evidence early on.
- 54.8% agreed that the TAS process generated significant time savings for other agencies - School Nursing Team, Education attendance, Police
- 100% said that they struggled to get attendance from some agencies due to stretched resources most notably Children’s Social Care & CAMHS although this has improved.
- 100% reported that it highlighted high caseloads on PFSAs (average 25-30 caseload).



- 63% agreed it was difficult to show impact on academic progress at this stage as the approach is not yet fully embedded over a school year
- The majority of pupils supported through strategies put in place by the TAS had increased attendance, reduced exclusions and reduced use of reduced timetables according to 69.2% of TAS coordinators asked.

### **One teams (Known as One Teams / Together Teams / Mendip Shape One Teams)**

Further work took place by partners to embed One teams across Somerset. These teams essentially operate a Think Family approach and play a role in coordinating multi-agency Early Help provision within their locality whose aim is to reduce demand and achieve positive outcomes.

Membership typically includes professionals from; getset, Police, Social Landlords, Health Visitors, Schools, MIND/Mental Health providers.

#### Impact of One Teams

Quantitative information around the impact of One Teams remains an area for development, partly due to the developmental nature of the approach.

The Bath Spa University conducted an evaluation of three 'One Team' Initiatives in September 2017. The report cited that local, dynamic, non-partisan, coordination of operational staff from across a range of services (where the richest picture of concerns is seen by all attending) ensures opportunities for intervention and support are identified and acted upon as early as possible. Performance data which corroborates this at this stage is not sufficiently developed, this this was acknowledged in the evaluation report. Measurement is very much an unresolved area and one which has been identified as needing a solution especially if One Team working and the financial commitment this requires is to be truly sustainable and become 'business as usual'.

### **Professional Choices**

The original intention of Professional Choices was a one-stop-shop for all early help professionals. The site is embedding well and uptake is growing rapidly. The use of the virtual meeting rooms is variable. This particular tool underpins both the early help and child protection process in terms of TAS meetings and team around the child meetings and provides the functionality to share information securely with partner agencies. Some targeted work needs to be done with partner agencies such as GPs to help them see the benefits.

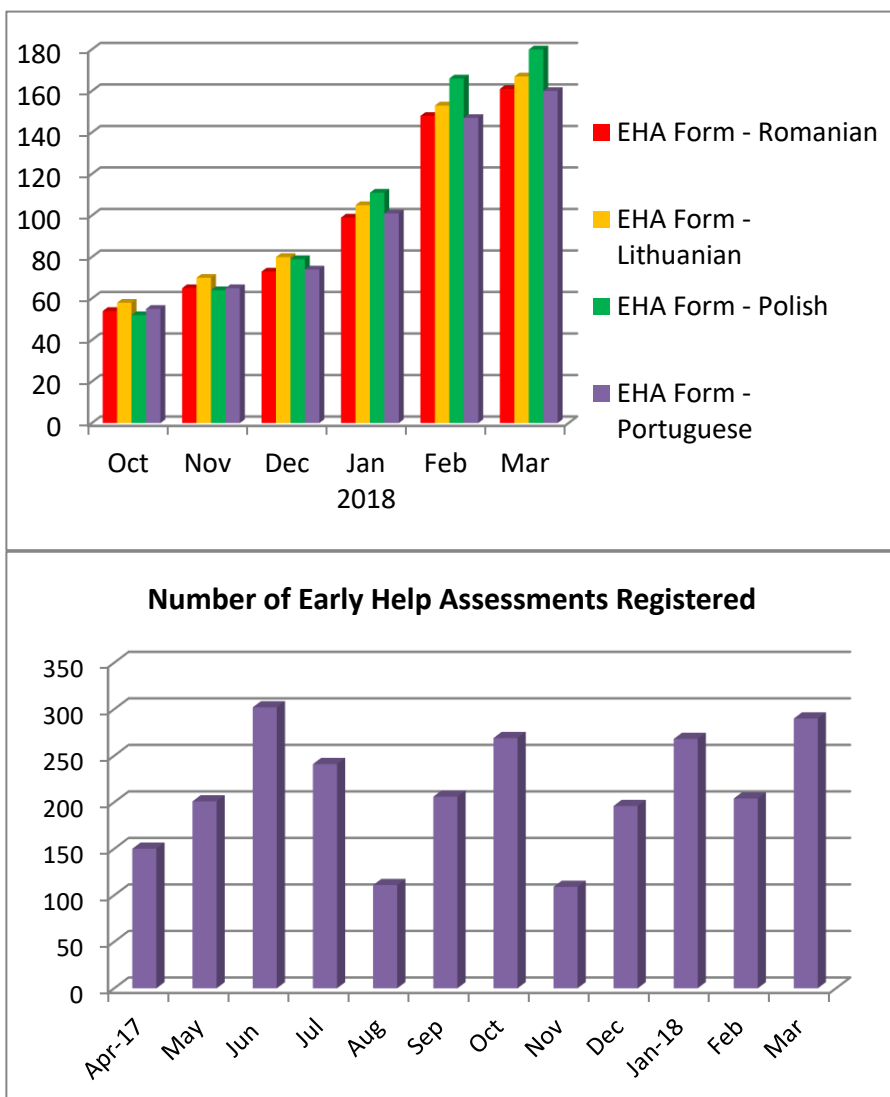
TAS meetings are utilising the virtual meeting rooms well but take up for team around the child meetings is still low. 'One' teams are really seeing the benefits which has seen a knock-on effect to other partners such as police, housing, health visitors and safeguarding leads.

Key progress:

- Registered users have increased from 1,571 in April 2017 to 2,357 at the end of March 2018
- Entries in the 'Who's who' directory of professionals have increased to 1,441 at the end of March 2018.
- The Early Help Assessment (EHA) form has been downloaded 16,171 times (March 2018) compared to 7,418 at the end of March 2017.

Early Help Assessment

The following graph shows the number of EHA's registered with the Early Help Advice Hub across the last year.



There is still some targeted work to do with partners in terms of embedding the EHA as the early identification tool to develop a holistic picture of a child/young person's strengths and needs across all aspects of their life.

The graph below shows the most common non-English EHA forms downloaded over the last 6 months which shows a steady increase and an indication that Somerset is becoming more diverse.

### **Partnership working**

The Early Help Strategic Commissioning Board is now well established with good multi-agency representation and clear action plans which are aligned to the CYPP. Chairs and vice chairs are also now in place for the 4 Early Help Area Advisory Boards and attend the strategic board to report on progress locally and to cascade the wider early help messages.

The Strategic Commissioner for Early Help is now in post (Feb 2018) whose remit is to evaluate the effectiveness, and strengthen, early help arrangements across Somerset.

Partnership delivery of early help is becoming stronger across Somerset as TAS meetings embed further and there are pockets of really good practice which need to be in place across the whole of Somerset, acknowledging models of delivery will be different to meet local needs. The launch of the thresholds guidance has been a key trigger for change across the partnership to address the 'refer on' culture that existed. Although there has been a reduction in inappropriate contacts to children's social care, the largest of which is from the education sector, there is still more to be done to tackle inappropriate contacts from other key partners.

The following are some examples of good partnership working:

#### Case Study 1:-

Through the Together Team, we were able to offer a single mother help with boundaries in relation; to her teenage daughter and awareness of appropriate behaviour at home and at school. The team also provided help with domestic health and safety and visit from fire service was arranged to promote safety at home and install fire angels. This was a team solution supported by getset, Children's Social Care and the school.

#### Case Study 2:-

There were some concerns within a local town Community about young people and their criminal behaviour and substance misuse. The young people were open to getset and individualised intervention was having a limited impact on their choices and decision making.

getset coordinated a multi-agency strategic response across over 15 different agencies, including CSC, YOT, Police, Housing, Community services, One Team, Education and many others.

One action from this was for getset to deliver 2 groups: Targeted parenting programme for the parents of the young people and a specific youth group intervention for the young people to coordinate a group response.

This youth group has now been running for 15 weeks and has considerably improved the situation. Anti-social behaviour (ASB) and criminality has reduced substantially, all 3 young people are accessing alternative education provision. So much so that all 3 are now in the process of reintegrating with universal youth provision within their communities.

**Case Study 3:-**

Child A had been open to getset, over the previous 3 years, over a number of occasions, primarily due to low level neglect of basic needs and education needs.

Despite a number of previous direct referrals to Somerset Direct, the threshold was not met for children's social care involvement.

However, through transfer meeting and conversations with the Assessment team manager we were able to evidence the chronic and persistent nature of the neglect, the impact of poor parenting and parenting capacity on the achievement and aspirations for the child and subsequently the most recent assessment has led to child in need planning being in place to effectively respond to the risk and need for this child.

**Case Study 4:-**

Child B had involvement with a range of services over the previous 5 years when a significant incident occurred at school resulting in post-traumatic stress. There were a range of concerns from all agencies that resulted in a children's social care (CSC) assessment.

However, through transfer meeting getset were able to work with CSC to establish clear protective factors and robust planning to effectively hold the case within L3 and prevent CSC involvement. This meant that statutory involvement was not required. We have now progressed this case further through effective support and partnership working and are looking to step this case down to L2 support within school over the next 4 weeks.

### Case Study 5:-

Child C: Came from a very complex family with a range of environmental, complex health and emotional needs. The family of this child has been known to a wide range of services without clear partnership working in place. getset have been able to engage in a multi-agency process with housing and police, through the Police Priorities meetings, held fortnightly, and establish clear need and concerns. This has resulted in us moving forwards with appropriate support for that family which has resulted in a strategy meeting being called to review need and whether threshold is met for Section 47 to progress support.

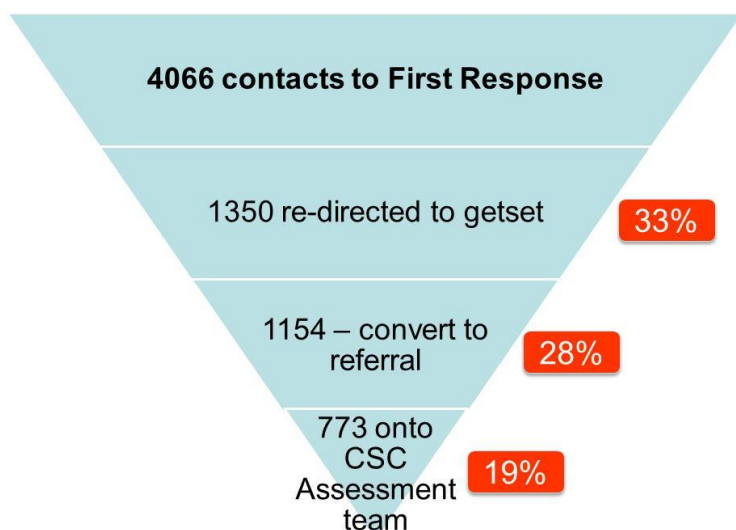
The right service at the right time?

The following table shows the number of contacts that have gone straight through to the Children’s Social Care First Response Team over the period 1 April 2017 to 31 March 2018 which have subsequently been triaged and either re-directed to the early help advice hub or the referrer has been advised to complete an EHA. The total number of contacts received by the First Response Team over the same period was 19038.

This data provides a strong indication of the agencies who have a lack of understanding of the early help process as they are not applying thresholds correctly, not using the various models of early help delivery such as TAS or the One Teams to discuss need and not taking advice from either the consultation line for safeguarding leads or the early help advice hub.

Source	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Anonymous	0	12	14	8	23	54	33	51	27	33	43	53	351
Early Years Provision	1	5	2	0	2	1	0	0	3	0	1	1	16
Education	11	14	21	23	2	40	74	83	60	37	61	62	488
Emergency Service	1	0	0	0	6	10	11	2	6	9	14	9	68
Family/Relatives	15	26	19	43	21	84	138	85	63	133	119	102	848
Friend/Neighbour	1	0	3	0	3	1	2	5	1	3	4	10	33
General Public	0	0	0	10	0	0	4	0	9	2	3	4	32
GP	0	6	0	3	0	2	11	17	6	19	4	8	76
Health Visitor/Nurse	0	10	4	7	2	2	1	12	6	2	5	10	61
Hospital	2	1	0	3	7	10	8	12	20	22	15	9	109
Mental Health Partnership	2	2	1	4	11	17	9	14	14	9	11	6	100
Midwife	2	8	4	0	2	14	1	29	6	12	4	10	92
Other Housing	2	0	0	1	0	0	1	3	3	4	0	0	14
Other Local Authority	0	0	0	0	0	1	3	0	4	0	4	17	29
PFSA	1	7	0	0	0	4	2	6	4	1	7	10	42
Police	19	15	21	37	8	61	107	107	125	56	103	91	750
Probation	0	0	1	1	0	0	7	2	6	2	8	9	36
Self	0	0	0	4	0	6	0	0	8	2	0	3	23
Voluntary Organisation	0	6	0	2	1	14	20	10	16	11	12	11	103

The diagram below shows a 60 day snapshot of contacts coming into First Response.



#### Findings:

- Significant increase in anonymous and family/relative/parent led referrals to CSC – concern that professionals are seeking to avoid use of EHA.
- Could result in delays due to the number of inappropriate contacts that have to be triaged. The above totals 3271 inappropriate contacts which the First Response have had to triage which takes them away from triaging genuine child protection concerns.
- Police are not applying their BRAG rating to their contacts which would ultimately reduce their inappropriate contacts.
- Although the largest reduction in inappropriate contacts has been seen by the education sector there is still concern as to why Education settings are not using the TAS meetings.

#### Focus for next year

- Implement the 0-19 Family Support Service which will re-model the children's centre buildings and bring public health nursing and getset staff together within SCC.
- Further develop the early help performance dashboard which prompts discussion and challenge across the whole system
- Improve effectiveness of the Early Help Strategic Commissioning Board and the role of the 4 Early Help Area Advisory Boards to challenge partners and take responsibility for early help, being seen as everyone's business
- Re-launch of the local offer via Somerset Choices
- Further analysis of the inappropriate contacts to children's social care which result in 'no further action' and step-down to early help to understand issues and take any necessary action



- Establish ongoing communication and engagement channel across the early help workforce so that practitioners feel more confident in using the early help tools on professional choices and seeking advice from the EH Advice Hub
- Scope activity required to evidence impact of early help e.g. TAS, One Teams which will inform where early help processes, systems and services should have greater impact
- Continue to review the EHA with partners, and scope out activity required to be able to complete the form digitally making it quicker and easier to use.

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## **Progress of Children & Young People’s Plan 2019-22**

Lead Officer: Philippa Granthier, Assistant Director – Commissioning and Performance

Author: Fiona Phur, Partnership Business Manager – Children’s Commissioning

Contact Details: [FZPhur@somerset.gov.uk](mailto:FZPhur@somerset.gov.uk); 01823 355259

Cabinet Member: Frances Nicholson, Lead Member for Children and Families

Division and Local Member: All

### **1. Summary**

**1.1.** Somerset Children’s Trust is developing a three year Children and Young People’s Plan (CYPP) commencing April 2019 setting out the actions we and our partners are taking to continue and sustain improvements in children’s services. The plan follows a multi-agency approach, and is influenced by the engagement with children and young people throughout 2018. Four priority area, managed by relevant Boards for each priority area will be in place, as follows:

1. A Happy Family Life
2. A Healthy Start to Life
3. A Great Education to Build Skills for Life
4. Positive Activities

**1.2.** Children and families are a key theme within the Health & Wellbeing ‘Improving Lives’ Strategy 2019 -2028, recognising the importance of providing the information and advice families need to help themselves and of focusing our help early and effectively when needed. The key priorities are to improve children’s safeguarding services; to improve exam results, particularly for the most vulnerable pupils; and to improve children’s health and wellbeing leading to the Improving Live’s outcome of ‘Fairer Life Chances and Opportunities for All’.

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

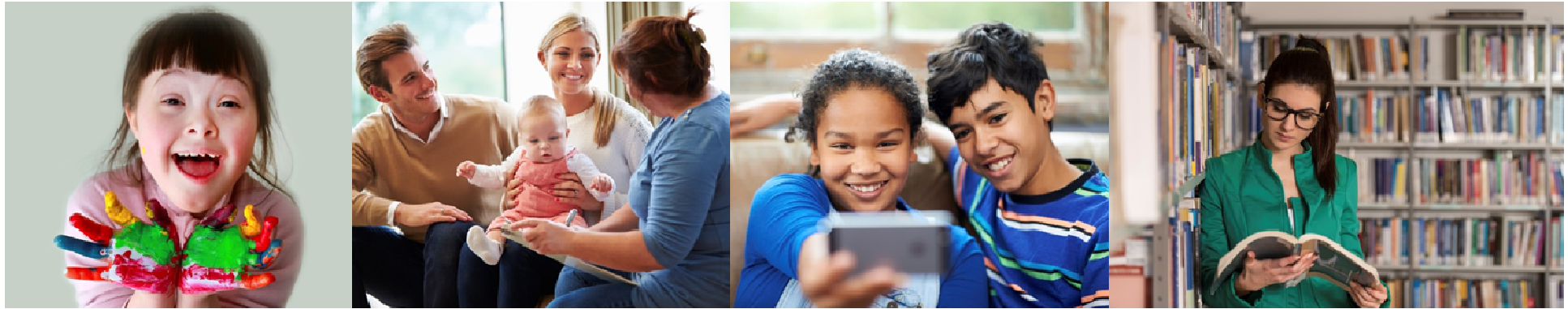
**2.1.** The Committee is asked to consider and comment on the draft CYPP, noting the Plan has yet to have final approval from the Somerset Children’s Trust Executive (meeting due on 31 January). Once the draft is approved, the Executive will decide upon final consultation and method of launch.

Timeline:

- 25.1.19 – CYPP Progress update to C&F scrutiny
- 31.1.19 - CYPP Progress update to SCT Executive
- 20.2.19 – Young People’s writing workshop
- Feb/Mar – Final plan out for consultation/approval
- Mar – SCT Approval
- 22.3.19 – Final CYPP to C&F scrutiny
- Mar/April – Launch of CYPP
- After April – Plan taken to Cabinet/Full Council

**2.2.** The attached presentation gives assurance to the Children & Families scrutiny of the contents and layout of the plan and the time line to completion.





# Children & Young People's Plan 2019 - 2022

## UPDATE TO C&F SCRUTINY

Presented by Fiona Phur, Partnership Business Manager



# Children and Young Peoples Plan 2019 - 22

## Progress to date :

- **Approval of 4 priorities by Children's Trust Executive**
- **First draft now written**
- **Awaiting data**
- **Awaiting approval of final draft from SCT Exec Jan 31**

# Contents

- 2 Foreword
- 3 Contents and Introduction
- 4 Main body
- 5 Background
- 6 The Challenge
- 7 Partnership working
- 8 Outcomes, priorities and measures
- 9 A happy family life
- 10 A healthy start to life
- 11 A great education
- 12 Positive activities
- 13 Conclusion
- 14 Appendices

## An Introduction to Somerset's Children & Young People's Plan 2019-2022

Our vision:

*Happy, Healthy And Preparing For Adulthood*

Our vision has been strongly shaped by young people themselves. We asked them about their hopes for the future and how they can be supported to thrive in Somerset. They told us that they want to grow up in loving families and caring communities with well supported and supportive parents, families, friends, schools and the wider community

We therefore want every child and young person in Somerset to have:

*A Happy Family Life* - strong families and vibrant communities

*A Healthy Start To Life* - safe and healthy lifestyles

*A Great Education* - high aspirations, opportunities and achievements

*Positive Activities* - things to do, and places to go to

These outcomes are interwoven: education, family life; positive activities and health can be addressed through synergy and collaboration. Our young people also reminded us to think of their safety and security, the accessibility of services and how to support the more vulnerable because of individual, environmental, social or economic factors. By recognising the crucial interaction between these outcomes, we will work together to improve outcomes for all children and young people. We will do this through actions in these four priority areas owned by the boards and groups of the Somerset Children's Trust - this CYPP will be the benchmark against which the Partnership's effectiveness and progress will be measured and against which the risk to achieving the aim of the CYPP will be managed.





# Growing Up In Somerset

## Worried About

77% say they worry 'quite a lot' or 'a lot'

36% Tests and Exams



5% do not get enough sleep

32% Family Problems



22% Health



23% Bullying



27% been bullied in past 12 months

## Primary School

8-11 years old



19% go to after school club / youth club



80% help with cooking at home

6% are young carers

3% had nothing to eat or drink before school

89% visited the dentist in the last 12 months

## Self-esteem:

30% high level of self-esteem

32% low level of self-esteem

## Feel Safe:

\*\*% at school

\*\*% outside

## Worried About

78% say they worry 'quite a lot' or 'a lot'

47% Tests and Exams



30% Family Problems



26% Mental Health



37% The Future



5% are young carers



18% had alcohol in the previous 7 days



20% have been offered drugs



5% regularly smoke

31% parents/carers smoke

## Feel Safe:

74% at school

58% outside

## Secondary School

12-15 years old



16% had nothing to eat or drink before school



14% had nothing to eat or drink for lunch

32% Not enough time to do other activities

9% Transport is a problem

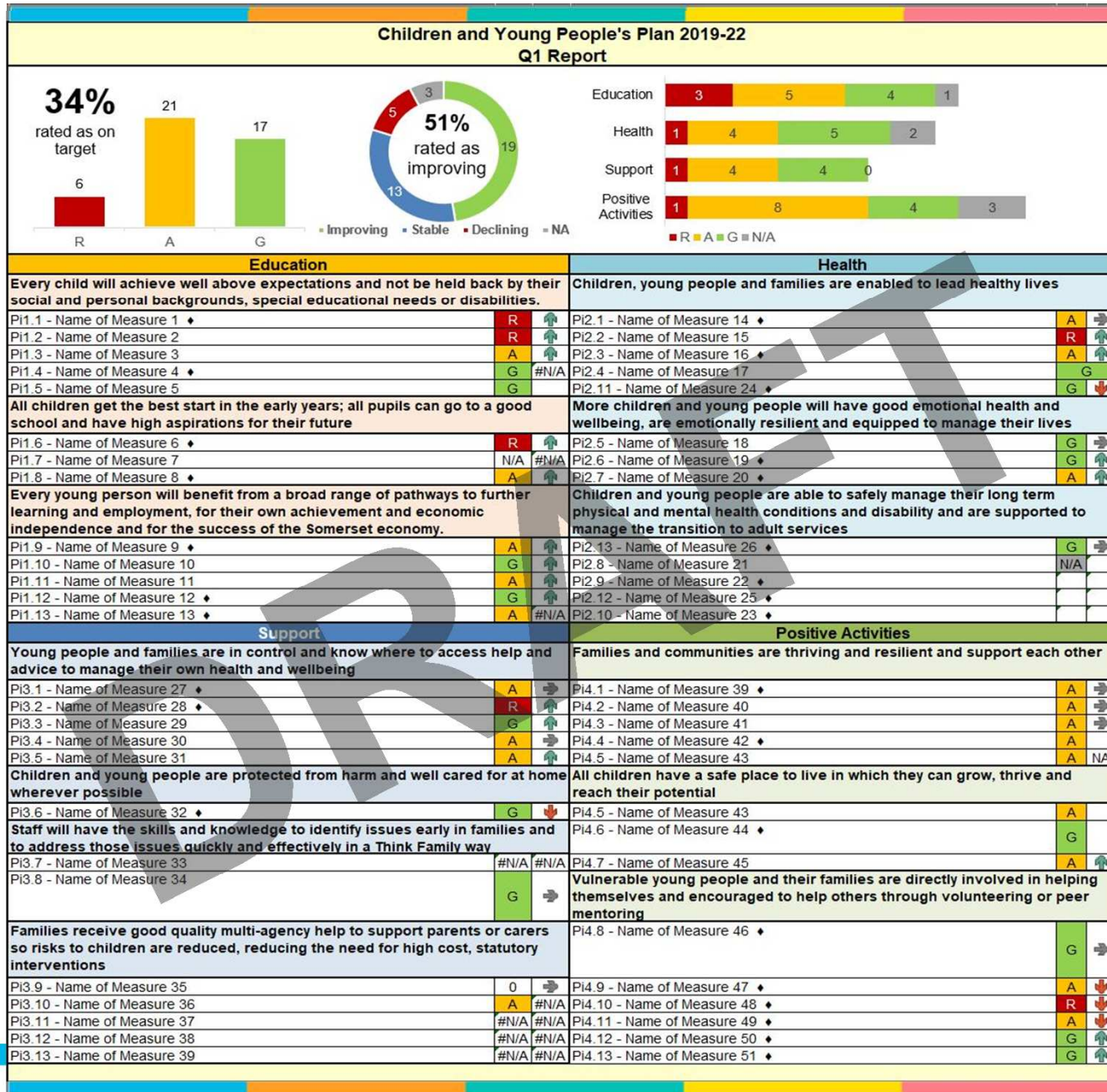
Enjoy most or all school lessons 40%



Want to continue in full time education

53%





# Children and Young Peoples Plan 2019-22

<b>CYPP update</b>	<b>C Scrutiny</b>	<b>25 Jan</b>
<b>CYPP update</b>	SCT Exec  Fortnightly reporting to Children's SMT	31 Jan
<b>Draft plan</b>	C Council/Full Council (?)	20 Feb
<b>C&amp;YP Consultation</b>	Young People's writing workshop	20 Feb
<b>CYPP Final / Soft Launch</b>	C Scrutiny	22 March
<b>CYPP Final/ Post Launch</b>	SCT Exec	30 April



**Thank you for your Support**

**Any Questions ?**



Somerset County Council  
Scrutiny for Policies, Children and Families Committee –  
25 January 2019

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## **Update on CAF-14b Proposals for the alteration and / or reduction of early help services provided to children and their families - getset**

Lead Officer: Julian Wooster, Director of Children's Services

Author: Philippa Granthier, Assistant Director – Commissioning and Performance

Contact Details: pgranthier@somerset.gov.uk

Cabinet Member: Councillor Frances Nicholson, Lead Member for Children's Services Division and Local Member: All

### **1. Summary**

- 1.1. On the 12 September 2018, Cabinet approved two proposals relating to changes within the getset service:
- CAF-14a relating to reductions in staffing levels across the service as a response to current demand levels and increasing caseload targets
  - CAF-14b relating to the launch of a public consultation exercise to review the provision of Somerset County Council early help services, to include the proposal that SCC no longer provide level 2 services.

CAF-14a was subject to a call-in by the Chair of Scrutiny for Policies, Children and Families resulting in a recommendation to Cabinet to defer implementation of CAF-14a pending the completion of the public consultation agreed via CAF-14b. Cabinet at its meeting in October 2018, approved to continue with the immediate implementation of CAF-14a.

This report provides details of the public consultation and emerging proposals. Final recommendations will be presented to cabinet for consideration on the 11 February 2019.

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

- 2.1. The Scrutiny Committee is asked to:
- Consider and comment on the proposals (appendix 1) for improving early help activity within Somerset;
  - Consider how they can continue to review the development of Somerset's early help approach, through increased scrutiny and challenge, to ensure all partners meet their statutory early help responsibilities laid out in 'Working Together to Safeguard Children 2018'.

### **3. Background**

- 3.1. **Somerset County Council's (SCC) getset services** were established in 2014 encompassing children's centre services at level 2 (universal and targeted support for 0-4 year olds) and level 3 family support work for families with children aged 0-19 years. The service is countywide and delivered in family homes, community buildings and in children's centre buildings.

getset is just one service providing early help for children and families in Somerset.

### **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 organisations and agencies should have in place effective ways to identify emerging problems and potential unmet needs of individual children and families. Local authorities should work with organisations and agencies to develop joined-up early help services based on a clear understanding of local needs. This requires all practitioners, including those in universal services and those providing services to adults with children, to understand their role in identifying emerging problems and to share information with other practitioners to support early identification and assessment.*

*Children and families may need support from a wide range of local organisations and agencies. Where a child and family would benefit from co-ordinated support from more than one organisation or agency (e.g. education, health, housing, police) there should be an inter-agency assessment.*

*A lead practitioner should undertake the assessment, provide help to the child and family, act as an advocate on their behalf and co-ordinate the delivery of support services. A GP, family support worker, school nurse, teacher, health visitor and/or special educational needs co-ordinator could undertake the lead practitioner role. Decisions about who should be the lead practitioner should be taken on a case-by-case basis and should be informed by the child and their family.*

### **3.3. Somerset's Early Help Strategy 2016-2019**

The Somerset vision is that Early Help is everyone's responsibility; we want children, families, communities and agencies to work together so that families are assisted to help themselves and are supported as soon as a need arises, thereby improving the overall wellbeing and quality of life of all Somerset's children, young people and their families.

Effective early help will strengthen resilience in children and young people themselves, in their families and build capacity in communities that keep children, young people and their families healthy and safe.

Somerset's principles are:

- Sorting out problems early means that children and families do better

and the costs to society are less.

- Providing help early is an important part of protecting children from serious harm or neglect ('safeguarding') and improving health.
- When individuals and communities are able to help themselves, everyone benefits.
- We want to recognise the strong contribution of volunteers, communities, local charities and support groups and businesses in Somerset.
- When we provide services we want to make sure this is based on evidence of what works.
- We want to spend more of our budgets tackling problems before they get worse, but at the moment the demand for services to tackle serious problems is growing. We need to find the right balance.

**3.4. The Ofsted inspection**, published in January 2018 identified that partners still had to do more to meet their responsibilities.

*Early help, although improved, requires further integration with partners to increase its capacity.*

*Early help services in Somerset have improved, yet are not fully established across the partnership. However, the majority of families benefit from responsive early help services that are effective in reducing risk. Practitioners successfully support families who are living with domestic abuse, poor parental mental health and substance misuse, through the provision of targeted and universal interventions.*

*Early help assessments and plans are improving in quality. However, they are still too variable and not all are sufficiently focused on actions for improving children's outcomes. Assessments do not always analyse children's experiences sufficiently and not all risks are clearly articulated. Plans do not consistently address the needs identified in assessments, or what families need to achieve within specific timescales*

**3.5.** In September 2018 Cabinet agreed to launch a public consultation exercise in relation to the council's provision of level 2 services, namely getset level 2, with the proposal to make significant changes to this service (CAF-14b). Details of the consultation are outlined in section 4 below and detailed in appendices 2 and 3. Through this consultation process a number of new opportunities have been followed up, most notably with the district councils to explore greater joint working across community development roles and resources.

**3.6.** Following the consultation exercise and considering the feedback and likely impacts, a set of proposals have been developed, detailed at appendix 1.

These proposals outline 5 key areas of activity that if addressed simultaneously with the three Safeguarding Partners (Local Authority, police and the Clinical Commissioning Group) and other stakeholders across SCC, District Councils, NHS agencies in Somerset, schools and early years settings,

the police, housing providers, and the charitable, voluntary and community sectors will develop and improve the early help offer in Somerset and will avoid any cliff-edge for families in the year-long implementation phase:

1. Improve the support and interventions for children with some additional needs – level 2
2. Strengthening Early Help Infrastructure with partners and redesigning SCC “Front Door”
3. Strengthening community capacity and capability
4. Improve the support and interventions for children with complex needs – level 3
5. Strengthen the multi-agency strategic approach to early help in Somerset

These proposals will be discussed with stakeholders via the Early Help Commissioning Board and Children’s Trust Executive prior to presentation to cabinet on the 11 February.

#### **4. Consultations undertaken**

- 4.1. The purpose of the consultation was to understand the impact of the Council no longer providing getset level 2 services for children with additional needs (as detailed in the Effective Support for Children and Families in Somerset guidance) and how best the Council, as the lead agency, ensures effective early help across the partnership in the future. The consultation was aimed at service users, partners and staff who work with children and their families across Somerset
- 4.2. The public consultation was launched on Monday 5 November 2018 and ran for 8 weeks, closing on the 31 December 2018.
- 4.3. The public consultation reflects the views of over seven hundred people through a questionnaire.

In addition, over 110 people attended public drop in sessions or were engaged via parenting support groups across the County.

A wide range of partners and professionals who work with children and families were also engaged through existing forums and meetings.

The full consultation report can be found at appendix 2. SCC’s response to the consultation can be found at appendix 3.

#### **5. Implications**

- 5.1. The Council has considered the feedback to the public consultation and used this to update the Equality Impact Assessment (EIA) (appendix 4) and form a separate response paper (see appendix 3).
- 5.2. The EIA shows that there will be some negative impact to some children and families by the proposed cessation of getset level 2 services at this time,



particularly those that access support via universal groups run by getset. The availability of some parenting programmes also appear to be a gap in provision. The early help arrangements in Somerset, whilst improving as indicated by Ofsted, have still some way to go to become more effective across the partnership.

- 5.3. The proposal is to retain the level 2 service for a further year to March 2020, in which time further development work can be undertaken with partners and the community and voluntary sector to develop Somerset's early help offer.
- 5.4. It is clear from the feedback from the consultation that there are some incorrect conclusions being made, which have been addressed in the separate council response paper (appendix 3). This includes a view that level 3 and 4 services (for those children and families with more complicated needs and those requiring social care involvement) are reducing or ceasing which is not the case and was clearly articulated in the consultation papers.

## 6. **Appendices**

Appendix 1 - Proposals to improve Somerset's early help approach

Appendix 2 – Consultation report - Proposed changes to the County Council's support and services for children and their families

Appendix 3 – SCC response to the consultation report

Appendix 4 – Equalities Impact Assessment

## 7. **Background papers**

- 7.1. Children and Young People's Plan 2016-2019  
Early Help Strategy 2016-2019  
CAF-14a and CAF-14b – part of the papers considered at Cabinet on 12 September 2018  
"Call-in" of CAF-14a – Scrutiny for Policies, Children and Families Committee 8 October 2019  
"Call-in" of CAF-14a – Cabinet 17 October 2018

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

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## Proposals to improve Somerset's early help approach

January 2019

Following the public consultation on proposed changes to Somerset County Council's (SCC) support and services for children and families and having due regard to the updated Equalities Impact Assessment, the following proposals have been drawn up for consideration by key partners on the Early Help Commissioning Board and Children's Trust Board. The Scrutiny for Policies, Children and Families Committee will also be asked for their comments before final proposals are recommended to Cabinet on the 11 February 2019.

There are 5 key areas of activity that if addressed simultaneously with the three Safeguarding Partners and other stakeholders across SCC, District Councils, NHS agencies in Somerset, schools and early years settings, the police, housing providers, and the charitable, voluntary and community sectors will develop and improve the early help offer in Somerset and will avoid any cliff-edge for families in the year-long implementation phase:

1. Improve the support and interventions for children with some additional needs – level 2
2. Strengthening Early Help Infrastructure with partners and redesigning the early help "Front Door"
3. Strengthening community capacity and capability
4. Improve the support and interventions for children with complex needs – level 3
5. Strengthen the multi-agency strategic approach to early help in Somerset

In detail the 5 programmes cover:

- 1. Support / intervention for children with some additional needs – level 2**
  - Retain getset level 2 team in its current form, for the implementation period until March 2020 (retaining £450k pa from troubled families grant which ends in March 2020) providing support to children with some additional needs at level 2 and their families by delivering group work and some key parenting programmes in areas identified as greatest need.
    - The team will move to providing group work and building resilient community settings, rather than individual case work, working alongside other key agencies that support 0-4 year olds eg health visitors and Early Years settings enabling more families to be supported.

- The team will provide some key parenting programmes and groups
- The team will deliver a “train the trainer” model for evidence based parenting programmes open to any community / voluntary group to enable them to identify and support more vulnerable families and run parenting programmes
- The team will align with the Public Health Nursing teams and be allocated across the 8 family hubs; they should act as community agents and help partners through training to identify and provide support for families so that partners can continue this once the getset level 2 service ends in March 2020.
- Continue to work with schools to develop the Team around the School model, ensuring it is fully embedded and reporting performance to assess impact. Consider feasibility to extend the model to cover ages 0-4 and 16+ ie wider remit than those of school age.

## **2. Strengthening Early Help Infrastructure with partners and redesigning the early help “Front Door”**

- Empower parents/carers to be confident in utilising self-help methods to increase self reliance, in line with SCC’s digital strategy, by:
  - Signposting families via Somerset Choices and the local offer (see below)
  - Redesign and resourcing of Somerset Direct (SD) to be first point of contact for young people and families (based on adults model) providing advice and guidance in a more comprehensive way, only referring onto the Early Help (EH) Advice Hub if appropriate
- Remodel EH Advice Hub as one multi-agency support and triage point providing support and training for professionals and for families requiring more intensive telephone advice.
- Assess requirements for implementing the Early Help Case Management (EHM) portal and / or roll out EHM to a wider group of professionals across partners to support them in early help work with families. (The cost of portal implementation is approx. £124k one-off with £50k annual recurring costs)
- Undertake further development of the current Early Help Assessment (EHA) into a digital form enabling quicker and simplified process for all practitioners and assessments that make sense to families.

## **3. Strengthening community capacity and capability / market development**

- Establish an annual £200k commissioning / grant fund (which could be increased with other partners financial contribution eg CCG, district councils):
  - Initially focused on mitigating gaps identified by cessation of getset level 2 for example investing in parenting programmes, and consideration to establish a children’s offer within community connect and community catalysts, developing and enhancing the current Adult’s model into a holistic family model that can better support children within their localities (based on successful implementation and learning from Adults commissioners)

- This fund will be facilitated by SCC with application/tender panels drawn from the multi-agency Early Help Commissioning and Area Advisory Boards to seed fund support at level 2 and 3 of need.
- Develop stronger, collaborative relationships with district councils working in partnership to develop and deliver a community development offer.
- Collaborate with partners and larger voluntary and community sector provision eg Homestart, Safe Families, Yeovil4Families, YMCA etc to identify further opportunities
- Strengthen the multi-agency Early Help Area Advisory Boards in each district council area to understand local needs, undertake local audit of provision and identifying gaps and prioritising early help action in their areas. This will allow integration with the emerging Neighbourhood model.
- Utilise Somerset Choices and the SEND Local Offer as key resource of information, advice and guidance to families by ensuring community groups, support and activities are widely publicised, thereby supporting individuals to help themselves and promote independence.

#### **4. Support / intervention with children with complex needs – level 3**

- Remodel and integrate children’s services level 3 services in line with Peopletoo recommendations.
- Retain a separate Children with Disabilities level 2 and 3 team and explore integration with the and explore integration arrangements with SEND and the NHS to provide a coherent offer neighbourhood offer.
- Remodel the Education Welfare Service to support the schools funded L2 service
- Through the Reducing Parental Conflict Programme, funded by DWP, Somerset will be testing models of face to face support to families starting in April 2019 at no cost; £38k additional grant has been secured to provide additional support
- Provide parenting work with families of young offenders utilising a £70k YJB grant in 2019/20 (following £40k 18/19)
- Test a business case to implement the national model of Pause in Somerset - a programme of support to vulnerable mothers who have, or are at risk of, repeat removals of children being taken into care.

#### **5. Improve multi-agency strategic approach to early help**

- Strengthen multi-agency EH Strategic Commissioning Board including revised membership to focus on:
  - Clear vision and communications and marketing to promote and engender support for early help in Somerset
  - Refresh and implementation of the EH strategy, offer and approach across Somerset
  - Measuring impact and effectiveness of EH across the “system”
  - Holding partners to account
  - Two way link with each of the EH Area Advisory Boards
  - Stronger voice of families and an ambition to co-produce.

- Greater presence from the community and voluntary sector
- Continue to embed Troubled Families (TF) approach and strategic outcomes across partners
- Improved information sharing and continued development and use of the TF data warehouse to provide intelligence on need and allow targeting of resources
- Continued development and awareness raising of early help “tools” ie Early Help Assessment, portal/access to EHCM, professional choices, effective support guidance
- Continue to train and develop the early help workforce

DRAFT

# **Proposed changes to the County Council's support and services for children and their families**



## **Public Consultation Report January 2019**

Somerset County Council (SCC) are proposing changes to the way that children and their families get support and services. This is due to the need for the Council to make significant savings whilst ensuring children's services deliver the minimum statutory requirement to protect and safeguard children.

A public consultation exercise was carried out over November and December 2018, with a series of drop in sessions, discussion groups and a questionnaire was used to ensure the public, staff and partners across the children's workforce had the opportunity to comment and influence the development and delivery of the services that affect them.

## 1.0 Executive Summary

The consultation exercise was to seek people's views on proposals that would see a reduction in some of the support currently provided for children and their families by the Council's getset service. The support that would be reduced is mostly for families with children aged 0 to 4 who have some additional needs (as defined in the Somerset Effective Support for children and families guidance).

The Council's getset services are part of its early help offer. Early help is what we call the services for children, young people and their families who are having difficulties that they can usually overcome or manage with a little bit of support from different organisations working together with them.

getset services are delivered in 2 parts:

- Work with children and families with 'additional' needs aged 0-4 (Level 2).
- Work with children and families who have 'complex' needs aged 0-19 and this work requires support from different organisations working together. (Level 3).

The public consultation reflects the views of over seven hundred people through a questionnaire.

In addition, over 110 people attended public drop in sessions or were engaged via parenting support groups across the County.

A wide range of partners and professionals who work with children and families were also engaged through existing forums and meetings.

We would like to thank people who contributed their views and provided feedback; clearly many respondents felt strongly about an issue that is of great importance to the people of Somerset. People we spoke to acknowledge the funding challenges but there was little feedback on further options other than not making any cuts. Some respondents highlighted the need to work differently and more collaboratively across the whole system including statutory, voluntary and community sector support.

Many people value the services they have received from getset, providing examples of positive changes within their families and also advice and guidance across a complex



system that has been welcomed. Getset have been referred to as 'the glue in the system'

There was a significant response received from the Frome area of the County and a petition with over 500 signatories was received regarding the Key Centre in Frome.

The most powerful outcome of this public consultation has been the opportunity to speak to communities and the children's workforce and has opened up dialogue about how we can do things differently in the future. This has been useful at both operational and strategic levels.

There was a solidly consistent view that early help and prevention is key to promoting the welfare of children, young people and their families rather than reacting later and then potentially requiring more specialist or statutory levels of support.

Please note this document should be read alongside 'The Council's response to the consultation'.

DRAFT

## 2.0 Approach and Methodology

### 2.1 Introduction and background to the consultation

The purpose of the consultation was to understand the impact of the Council no longer providing getset level 2 services for children with additional needs (at [level 2 of the Effective Support for Children and Families in Somerset guidance](#)), and how best the Council, as the lead agency, ensures effective early help across the partnership in the future. The consultation was aimed at service users, partners and staff who work with children and their families across Somerset.

### 2.2 Development of proposals for consultation

The consultation consisted of the following documents:

- Consultation paper
- Consultation questionnaire
- List of parenting support groups split by district (list contains getset and non-getset groups)
- Supporting data pack

The consultation paper introduces the proposals and explains what getset's role is, as well as the wider Somerset early help offer. The 4 levels of need are explained, and it is made clear which aspects are both affected and not affected by the proposals. It describes what support is on offer in each of the 5 districts and what support would be offered following the proposals.

The consultation questionnaire asked a total of 18 questions which included a section 'about you'. There were 7 questions relating to the actual proposals.

Appendix 1 lists parenting support groups run by both getset and non getset organisations and makes it clear what would stop. The information for this was provided by staff within the getset service.

Appendix 2 contains demographic and contextual data.

- Population data
- Number of 4 year olds in Somerset
- Forecast changes in population of 0-4 year olds
- Deprivation data
- % of children reaching good levels of development at early years foundation stage
- Map to show location of the 8 family centres

### 2.3 Consultation sign off process

SCC officers, including expertise from the consultation, equalities, communications and legal teams, devised the questionnaire and supporting documents as listed above.

To make sure the consultation documents were as clear and concise as possible, we engaged the Somerset Parent Carer Forum to help finalise the papers before they were published.

The draft consultation papers were shared with the following groups on the 31st October 2018 before its launch on the 5 November 2018:

- SCC Strategic Commissioning Group
- SCC Senior Leadership Team
- SCC Children's Services Senior Management Team
- SCC Scrutiny for Children and Families Committee Chairman
- Somerset Children's Trust Executive
- Family Support Services Project Board
- Senior members of staff from Somerset Partnership NHS Foundation Trust
- All staff members of the getset service
- Union members

The public consultation was launched on Monday 5 November 2018 and ran for 8 weeks, closing on the 31 December 2018.

On the launch of the consultation the proposals and background information were made available publicly online on SCC website; in paper form at each of the 8 main family centres and in each of Somerset's libraries. Details of the consultation, the dates of the information drop in sessions and contact details were sent to a wide range of individuals and groups, including local press. The events were promoted extensively on social media, to key stakeholders (see 2.5.1 for full list) and through members of the consultation team attending the 10 parenting support groups which are led either by the getset service and/or the Public Health Nursing service.

A consultation email address and telephone number was set up and referenced on all consultation documentation and communications, to enable people to give more detailed or specific responses, request hard copies of the information or request them in other formats e.g. braille and different languages. Somerset Direct and County Hall reception staff were made aware of the consultation in case there were any enquiries from the public.

We received:

- No requests for consultation documentation in a different format or language.
- 16 requests (mainly from Parish Council's) for hard copies of the consultation documentation, mainly posters and questionnaires

## **2.4 Participation**

We arranged seven information drop-in sessions, across the county which were manned from 10.00am to 6.00pm by SCC officers and were held in community locations as shown in the table below. These sessions provided an opportunity for interested parties to, collect hard copies of the consultation documents, ask questions about the consultation or hold discussions with a member of staff, prior to giving their

views through the questionnaire or email address provided. We spoke to 117 people at these sessions.

Date	Venue
13/11/2018	Glastonbury Library
14/11/2018	The Key Centre, Frome
14/11/2018	Frome Library
19/11/2018	The Hub, Minehead
22/11/2018	Taunton Library
28/11/2018	Victoria Park Community Centre, Bridgwater
04/12/2018	Yeovil Methodist Church

Feedback from getset service staff was also sought; staff were able to complete the consultation questionnaire (20 responses were received), and we ran a getset staff focus group, where staff were asked to give their views on the impacts of the proposed changes to the service, including their views on the impact on other professionals.

We arranged for members of the consultation team to attend 10 different parenting support groups across the county, either run by getset or with their involvement; this included Stay, Play and Learn, Healthy Child Clinics and Young Parents Group. This enabled us to speak to families using the services and make sure their views were being captured. We spoke to 83 people at these sessions.

Date	Venue	Type of group
07/11/2018	Chard Baptist Church	Healthy Child Clinic
08/11/2018	St Peter's Hall, Yeovil	Stay, Play and Learn
15/11/2018	Williton Children's Centre	Breastfeeding support
16/11/2018	Sydenham Children's Centre, Bridgwater	Stay, Play and Learn
20/11/2018	Wellington Methodist Church	Stay, Play and Learn
21/11/2018	Minehead Old Hospital	Healthy Child Clinic
27/11/2018	Acorns Children's Centre, Taunton	Young Parents group
29/11/2018	Glastonbury Children's Centre	Stay, Play and Learn
03/12/2018	Acorns Children's Centre, Taunton	Healthy Child Clinic
04/12/2018	Watchet Community Hall	Healthy Child Clinic

Letters were also sent to 227 families who had received support from getset level 2 service over the past year to raise awareness of the consultation and encourage them to take part.

We advertised a Freepost address for any completed hard copies of the consultation questionnaire to be sent to, or they could be handed into any of the Children's Centres or libraries. All completed hard copies of the questionnaire were input to the Council's online consultation software, to enable all analysis and reporting.

## **2.5 Promoting the consultation**

To ensure the maximum possible exposure of the consultation and to encourage the largest possible response, a proactive multi-faceted approach was taken to the promotion of the exercise across a number of different channels and media.

Promotional posters, the proposals, consultation background material and questionnaires were made available in all the main children's centres, libraries and where requested hard copies were sent to parish and town councils.

To raise awareness of the consultation, prior to its launch, SCC officers attended the following meetings/boards:

- Voluntary and Community Sector Strategic Forum
- Somerset Children's Trust Executive Group to raise awareness with strategic leads from across the partnership including health, police and education
- Early Years Partnership Meeting to raise awareness with nurseries.
- Scrutiny for Policies, Children's and Families Committee
- Family Support Service Project Board to raise awareness within Public Health Nursing.
- Primary Headteacher Conferences to raise awareness with Primary/Pre-Schools.

There were a total of 3 press releases issued throughout the duration of the public consultation:

- A press release was distributed to all Somerset media – print, broadcast and online – on 5 November 2018. This included a summary of the proposals and details of the information drop-in sessions, sign-posting residents to the online consultation. This produced coverage in the majority of the county's print, broadcast and online media outlets.
- A second press release was issued on 14 November, highlighting the remaining drop-in events still to take place.
- On 3 December a third press release highlighted the half way point in the consultation and the consultation deadline of 31 December.

getset and Public Health Nursing staff were asked to have their say and also to promote the consultation with service users they came into contact with, either at group sessions or one to one engagement.

We wrote to all getset volunteers (5) to make them aware of the consultation and ask them to have their say.

A Members Information sheet was issued at the launch of the public consultation to make all Councillors aware of the relevant details, should they be contacted by any of their constituents during the consultation period.

2.5.1 A briefing note was circulated to key groups and stakeholders, asking for the recipient to promote the consultation, providing a summary of the consultation details, the schedule of information drop-in sessions and how to contact us with any questions or requests for further information. The groups included:

Key partners across the children's workforce:

- All nurseries and childminders through email and facebook groups
- Executive Officers who represent Primary, Secondary and Special schools
- Special Educational Needs and Disability Information, Advice and Support (SENDIAS)
- 1610 Leisure Centres
- Somerset and Avon Rape and Sexual Abuse Support (SARSAS)
- The Phoenix Project
- Somerset Partnership NHS Foundation Trust - SHARE (Schools Health and Resilience Education Project) and Children and Adolescent Mental Health Service (CAMHS)
- MIND
- Family Counselling Trust
- Special Educational Need Co-ordinators (SENCO's)
- Somerset Parent Carer Forum (SPCF)
- SCC Short Breaks team who circulated details to all families who are signed up to their regular newsletter
- Avon and Somerset Police
- Housing Providers
- Voluntary Sector Organisations listed on Voluntary Sector Forum representative lists
- Somerset NHS Clinical Commissioning Group
- GPs via GP Bulletin
- Frome Autism Support Team (FAST) Parent support group
- Parish and Town councils
- Escape support group
- Somerset Autism
- Ups and Downs South West

Partnership groups / boards

- Corporate Parenting Board (consisting of councillors and partner staff)
- Somerset Children's Trust (consisting of staff representatives across a wide range of agencies who support children and families)
- SCC Strategic Commissioning Board
- Early Years Sub Group
- Early Help Strategic Commissioning Board
- Somerset Partnership NHS Foundation Trust (Musgrove Park Hospital – Maternity, Midwifery and Children's Departments (including Public Health Nursing))
- Yeovil District Hospital NHS Foundation Trust (Maternity, Midwifery and Children's Departments)

- One Team/Together Team Leads
- Community Learning Partnerships (school clusters)
- Somerset Safeguarding Children Board (SSCB)
- Local Medical Committee

#### Groups for young people

- Somerset In Care Council (SICC) – for children in care
- Somerset Leaving Care Council (SLCC) – for children who have left/are leaving care
- The Unstoppables – for children with special educational needs and disabilities
- The Youth Service/Youth Parliament
- Sparks – Young people forums

In an attempt to ensure that the views of traditionally under-represented areas of the community were captured and considered, specific programmes of activity were developed as part of the consultation process. We commissioned Diversity Voice to translate the consultation paperwork into Portuguese, Polish and Romanian and then engage with relevant families in these communities. This resulted in at least 56 consultation questionnaires being completed by nationalities other than English (including Bulgarian, Lithuanian, Danish and French).

The consultation was promoted via the Children with Disabilities website. Details were also sent to professionals working in schools, with disabled young people, and included the main parent support groups in the county.

In order to engage with people of different races and from different ethnic groups, the consultation was promoted through a variety of black, Asian minority ethnic (BME) groups, including:

- A Ray of Sunshine for the Child - Helps integrate Slovak and Czech families. Also provides advice about domestic violence.
- Bridgwater Islamic and Cultural Centre
- Bridgwater Syrian Refugee Resettlement Volunteer Group
- British Bangladeshi Association Somerset
- CHARIS - Christian refugee support charity resettling refugees one family at a time
- Diversity Group (supported by Halcon One Police team) - Support group for BME communities in and around Halcon/Taunton providing advice and social activities based at Moorlands Community Centre in Halcon, Taunton.
- Equality and Inclusion Team (Yeovil District Hospital)
- Holy Ghost Church Yeovil - Church supporting Polish, Indian/Keralan and Filipino congregations
- Johnny Mars Foundations - Bringing people together through music, conquering barriers such as racism and cultural education
- Martock Christian Fellowship - Christian group (non-denominational) with BME congregation members
- Minehead and District Refugee Support Group
- Minehead Methodist Church - Little Fishes Toddler Group

- Oakwood Church - Christian (Pentecostal) Church with BME congregation/members
- Polish Association Taunton - Support and social group for Polish people living in and around Taunton.
- Polish Christians in Somerset - Community faith group for the protestant Polish community in Somerset. Predominantly social and religious meet-ups with some support and community work
- Polish Voice TV - Support organisation for BME children and young people providing casework for schools and running youth groups.
- RAISE (Racial Awareness, Inclusion, Support and Education CIC)
- Somerset Engagement Advisory Group - Community stakeholders, voluntary sector, patient and carer representatives, lay users, volunteers. Strategic overview and challenge of health care services
- Somerset Gypsy and Traveller Forum
- South Somerset Filipinos and Friends Association (SSFFA)
- South Somerset Muslim Cultural Association
- Stand Against Racism and Inequality (SARI)
- Street and Glastonbury Muslim Association
- Syrian Community in the South West
- Syrian Refugee Support Group
- Supporting Syrian refugees in Frome
- Taunton Welcomes Refugees
- Tuga Productions - Portuguese social activities and support. Organises Portuguese and multicultural events.
- Turkish Community Bristol and South West
- Young People Frome - Multicultural Frome - Represent the needs of young people in Frome (Young People Frome). Celebrate the diversity in Frome (Multicultural Frome)

The consultation was also promoted to a range of other groups through direct contacts in these groups.

The consultation was promoted through the Compass Disability Services.

During the consultation period, we attended and presented to the following groups to both raise awareness of the consultation and to talk to staff groups to capture impacts and concerns.

- Early Years Communities launch event
- Parent and Family Support Advisor (PFSA) Conferences
- Early Years SENCO Conference
- Team Around the School Steering Group
- Yeovil Hospital – Acorn Team (Vulnerable women)
- Early Help Strategic Commissioning Board
- Clinical Executive Committee, Somerset NHS Clinical Commissioning Group
- Musgrove Hospital – Children’s Community Nursing Team
- SCC – Children’s Social Care team – Taunton
- Children’s Trust Board – Extraordinary Meeting to discuss getset proposals
- Somerset Partnership NHS Foundation Trust Public Health Nursing Managers Meeting



- SCC Team 8 (Community Adolescent Team)
- SCC Early Years SENCO Team
- Strategic Community Development leads from all 4 District Councils

Articles were included in SCC Staff newsletters (Our Somerset and Core Brief), throughout the consultation period.

## 2.6 Social media

The consultation was promoted heavily through the authority's two most established social media platforms – Twitter (which has more than 10,000 followers) and Facebook (which has more than 5,000 Facebook 'friends')

*Sample Meme used in both Twitter and Facebook:*



In total, over that period the level of engagement was as follows:

- Impressions 29,850
- Engagements 230
- Likes 26
- Retweets 53
- Link clicks 28

Please note definitions:

- Impression – number of times a tweet has been delivered to a Twitter account's timeline.
- Engagements – (number of times a user interacted with a Tweet. i.e. Clicks anywhere on the tweet, including Retweets, replies, follows, likes, links, cards, hashtags, embedded media, username, profile photo, or expansion)
- Likes – number of time a user liked a tweet
- Retweets – number of times a user re-posted a tweet on their own account

- Link click – number of times that the link to the online consultation was followed.

## **Facebook**

### *Sample Facebook posts*

*The first consultation drop-in sessions to discuss proposed changes to our getset Service take place in Glastonbury & Frome next week. If you have an interest, please come along & share your views.*

*You can find more info and complete an online questionnaire on our website [www.somerset.gov.uk/getsetconsultation](http://www.somerset.gov.uk/getsetconsultation)*

*Questionnaires also in our libraries and Family Centres and hard copies can be requested by emailing [getsetconsultation@somerset.gov.uk](mailto:getsetconsultation@somerset.gov.uk)*

- Reach: 47,012
- Engagements 3,110
- Including (reaction/comment/shares) 516

Please note definitions:

- Reach - Number of unique people who saw your content.
- Engagement – Number of times people interacted with post
- Reaction/comment/shares – Number of times users posted a reaction, commented on or shared a post.

## 3.0 Analysis of Results

### 3.1 Approach and methodology

#### Quantitative Analysis

The responses to the consultation were analysed to quantify the number and type of responses and the expressed level of agreement, awareness and impact on individual respondents, services / organisations, and their communities.

Equalities Duty - As part of the consultation questionnaire, respondents were requested to provide some information about themselves. These were grouped into the following groups:

- Someone who uses getset services
- Member of the public (who doesn't use getset services)
- Member of staff (from SCC and the wider children's workforce)
- Responding on behalf of an organisation or group
- Blank

Further information regarding the views expressed concerning the potential impact of the proposals to those with protected characteristics can be found in the accompanying Equalities Impact Assessment.

#### Qualitative Analysis

Over 1,200 free text comments, were analysed to identify the key themes emerging from the responses.

### 3.2 Analysis

731 people completed the questionnaire. These can be broken down as follows:

<b>Someone who uses getset services</b>	<b>Member of the public (who doesn't use getset services)</b>	<b>Member of staff</b>	<b>Responding on behalf of an organisation of group</b>	<b>Blank</b>
171	227	235	77	21

At any one time, over the last 12 months, an average of 299 families at Level 2 were receiving individual support from getset staff so a response of 171 from someone who uses getset services equates to 57%, which is a good representation of getset users.

Nearly a third of all responses were from SCC staff or people working in the wider children’s workforce. This can be broken down further:

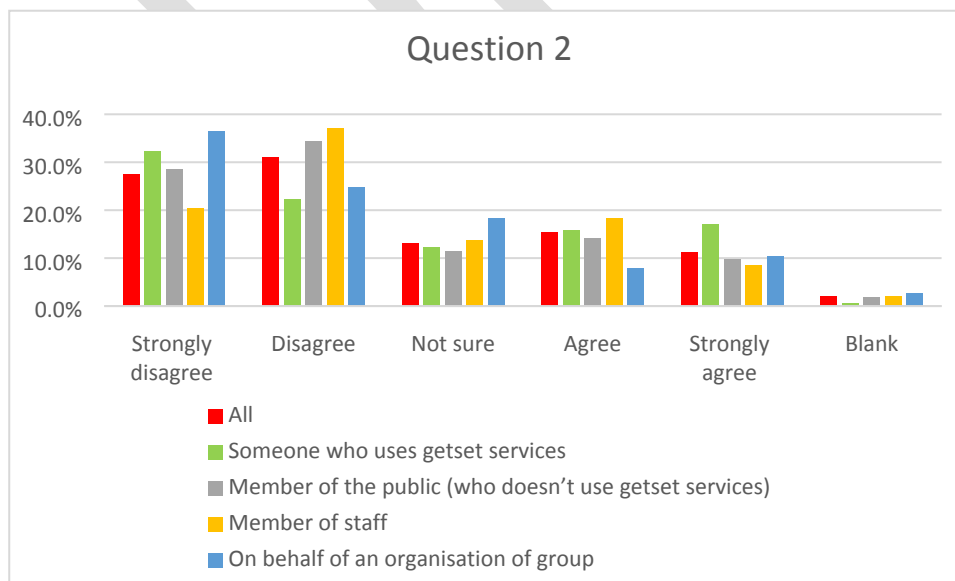
Of those who said member of staff

Question:1D Please specify your area of work:

District Council - Community Development	1
District Council - Housing	1
District Council - Other (please specify)	5
Health - CAMHS	10
Health - GPs	11
Health - Health Visitors	18
Health - Other (please specify)	37
Health - School Nursing	4
Police - Other (please specify)	1
Police - PCSOs	3
Police - Police officers	3
Schools - Other (please specify)	25
Schools - Parent and Family Support Advisors (PFSAs)	6
Schools - Pastoral support	5
Schools - Special Educational Needs Co-Ordinator (SENCO)	3
Schools - Teacher	22
Somerset County Council - Children’s Social Care	19
Somerset County Council - getset service	20
Somerset County Council - Other (please specify)	16
Other (please specify)	27

It should be noted that of the 235 respondents, 5 of them did not confirm their area of work.

### 3.2.1 Question 2 asked “To what extent do you agree with our approach of focusing our funding on the children and families with the most significant needs”



The majority of respondents either strongly disagree or disagree with our approach. The analysis from the free text fields for this question show that respondents felt funding should

be focused on early help and prevention to prevent families needs escalating and requiring higher levels of care. Agreement with the approach is strongest from those who use the getset services.

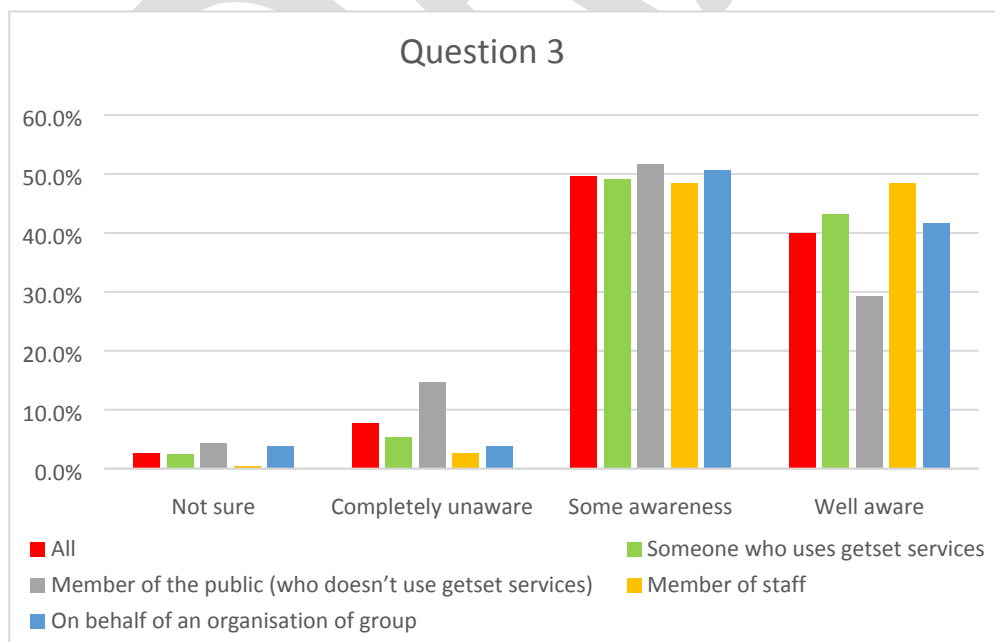
Unfortunately if the level 2 services are cut this may mean that more families end up requiring the more complex services and getting to the stage where needs are more significant, whereas input at the lower levels often is empowering to families and can help them manage their own needs in the long run, thus reducing their potential need for more complex support.

**Somerset Partnership NHS Foundation Trust, Paediatric Integrated Therapy Service**

Focusing on prevention will save the council money in the long run. Reducing skilled prevention services will increase spend for the council eventually, and will increase wider issues in communities. Identifying issues early, and supporting families to manage these issues without escalation into more expensive services, is a repeated learning point from research into this area. If the prevention service isn't working, it should be improved and redesigned, not deleted.

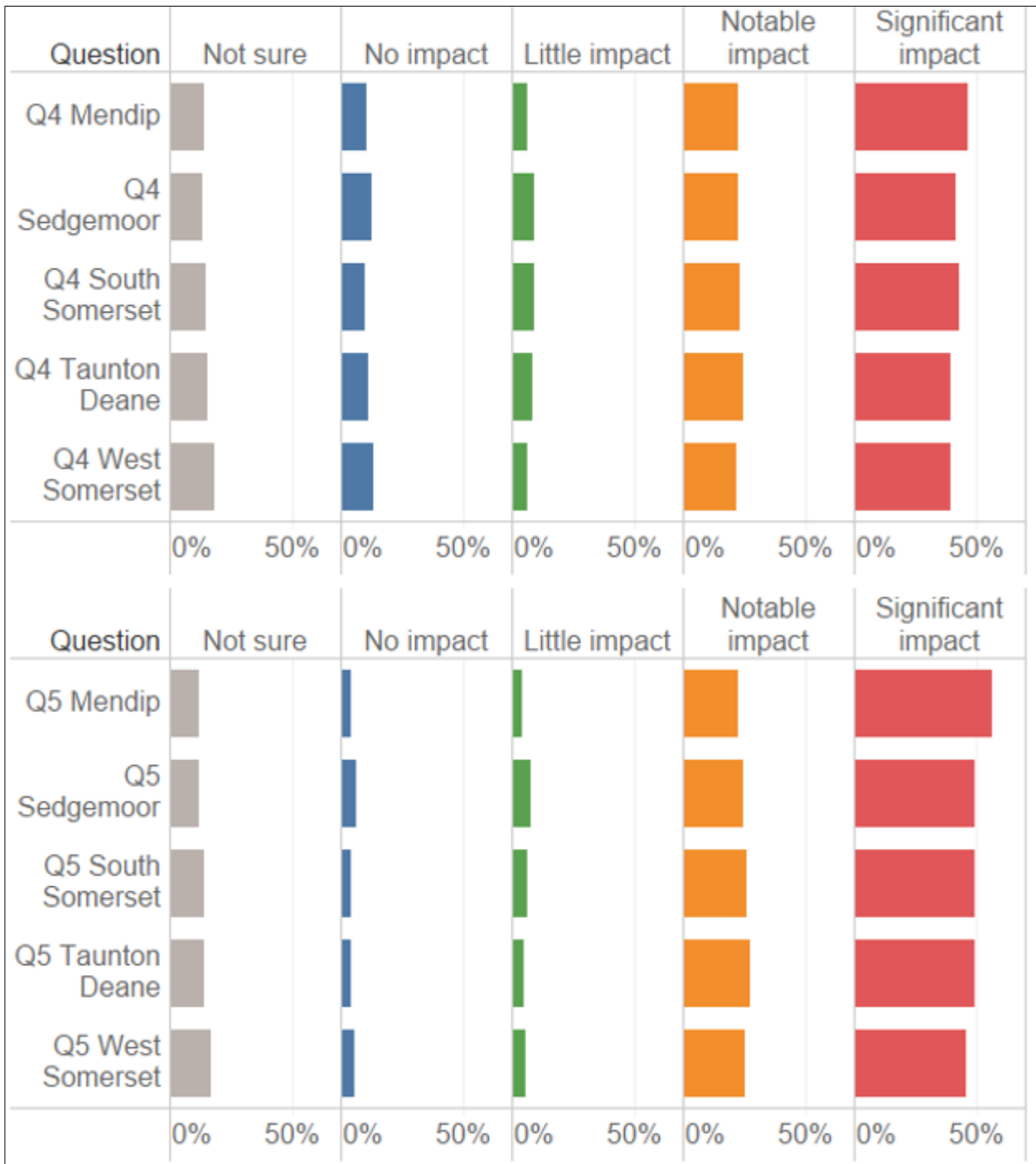
**Member of the public, South Somerset**

**3.2.2 Question 3** asked “to what extent were you aware of the parenting support groups currently available across Somerset?”



89.6% of respondents had ‘some awareness’ or were ‘well aware’ of the parenting support groups currently available across Somerset, which is reassuring.

**3.2.3 Question 4** asked about the impact regarding stopping the getset parenting support groups for children and families with additional needs (level 2) on individuals, organisations or services. While **question 5** asked about the impact on communities.



Question 4 showed that across all districts over 60% of respondents said there would be either a 'Notable impact' or a 'Significant impact'. This is a strong message from the free text responses where the majority of respondents felt that if the getset parenting support

groups were stopped there would be a gap in provision that couldn't currently be met by the community led groups as they do not have the same level of professional knowledge and training in safeguarding which is crucial.

Question 5 showed there were slightly more respondents, 70%, that reported a "notable or significant impact". This could be due to respondent's belief that proposals may affect more people in the community than themselves.

SCC are particularly interested to find out how families who have used getset feel they would be impacted by the proposals. Responses for Mendip, South Somerset and Taunton Deane followed the trend of saying there would be a notable/significant impact but responses for Sedgemoor and West Somerset felt there would be less of an impact with 60.4% and 58% respectively reporting no or little impact or not being sure. However, it should be noted that respondents could select more than one geographical area in their responses.

In my experience other groups do not provide the same level of support and do not have experienced qualified members of staff or offer 'Parenting support'. The other groups you refer to are often led by volunteers or parents and charge a fee of between £3 -£5

**Someone who uses getset services**

getset staff are highly trained and also interact on a continuing basis with other agencies. They are therefore able to spot issues which well-meaning volunteers would be unlikely to pick up on and make referrals in a timely fashion - nipping things in the bud. Their work is not just about providing a play space - it is many-layered.

**Team around the school Co-ordinator**

The following quote from a user of the getset service captures how the majority of respondents felt.

I have been to many other baby and toddler groups listed in your appendix 1 but none of them are run by the professional experienced people who run the getset groups. Many are run by volunteers who simply don't have the knowledge that getset staff have or are run as businesses (eg. singaling, tinytalk). The getset staff take time to get to know you and your child, they ask how you are, what your needs are and whether you need any advice - about feeding, sleeping, behaviour and look out for whether you are doing ok.

**Someone who uses getset services**

The group I attend is attended by some very vulnerable families, it is all well and good saying we can go to community groups but these are not run by professionals who can advise and offer early intervention. Most of the families that attend the group would be looked down on at community groups and most are made to feel unwelcome due to status or the clique of the group's. This is personal experience from myself and many other parents.

**Someone who uses getset services**

Respondents who identified themselves as 'members of staff' also highlighted that stopping these parenting support groups would have an impact on their service in terms of an increase in referrals.

As a service we are already seeing the impact of less and less early intervention in the county, the increase in referrals for children with behavioural, attachment, trauma or just delayed development due to lack of opportunity/parenting is staggering (we are not commissioned to address most of these areas but people don't know where else to go). Your Level 2 service is one of the only services left supporting these families at an early stage and stopping the need for significant intervention in the future.

**NHS Children's Occupational Therapist**

Respondents felt that the getset led groups are geographically located in the most appropriate areas, usually in line with levels of deprivation and some of the groups listed in the 'Somerset Service Offer (Early Childhood Services) Appendix 1' document are not always in the most appropriate area. Attending alternative groups could result in additional travel (cost/distance).

There are direct impacts on our housing service and on the One Team model of community working. We can currently refer / support families to the parenting support groups, where we understand that there will be trained professionals that can assist children / families with particular vulnerabilities. These groups provide an essential community resource, located in our most disadvantaged area. Similarly, getset workers (Level 2) can seek One Team / Housing assistance to support families with particular problems. The removal of these groups presents us with significant concerns - it may result (medium term) in Housing / One Teams with a growing caseload of families with extra complexities, which in turn has an impact on our collective resources and capacity.

**Taunton Deane and West Somerset Council**

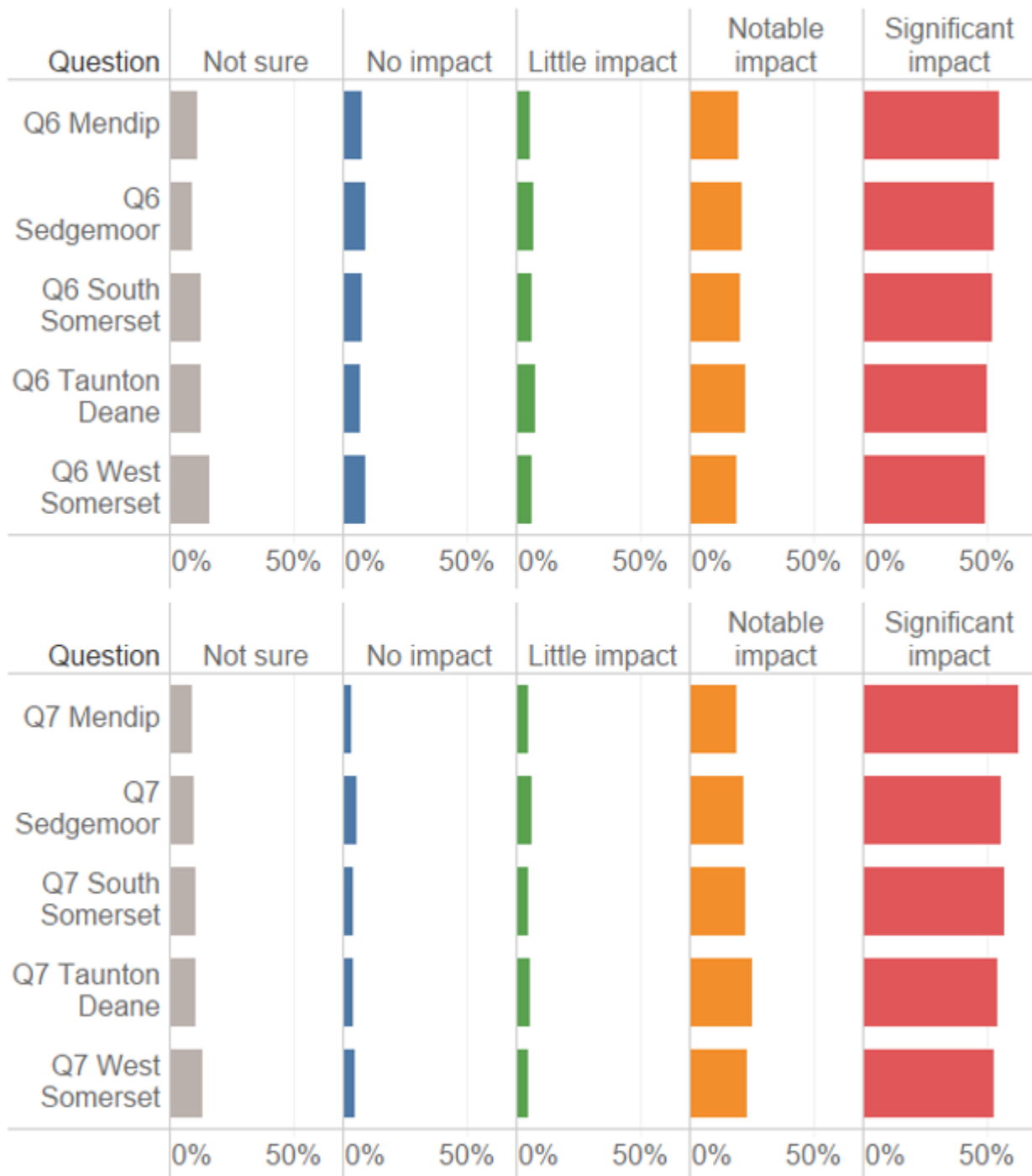


So many of the local communities are significantly deprived and these groups are a life-line for parents who have little money and often not a lot of social contact with others and are an opportunity for the children to socialise with peers and access stimulation to support their development. The groups also allow parents and the children to access skilled staff and I fear that if local communities apply for grants and try to replicate the work of Get Set, they will not be skilled enough to do so.

**Member of staff, NHS Children's Speech and Language Therapist**

DRAFT

**3.2.4 Question 6** asked about the impact regarding the support for individual families on individuals, organisations and services while **question 7** asks about the impact on communities.



Question 6 shows that across all districts over 65% of respondents said there would be either a 'Notable impact' or a 'Significant impact'. Again, this is a strong message which was reinforced by the free text responses where the majority of respondents felt that if the getset support for individual families were stopped there would be a gap in provision which would lead to families requiring higher levels of support.

Question 7 showed there were slightly more respondents, over 75%, that reported a “notable or significant impact”.

SCC are particularly interested to find out how families using getset feel they would be impacted by the proposals. Responses for Mendip, South Somerset and Taunton Deane followed the trend but responses for Sedgemoor and West Somerset saw less of an impact with 45.9% and 46.1% respectively reporting little or no impact or weren't sure. However, individuals could select more than one answer.

Analysing responses from users of getset services there appeared to be little difference in how much they valued parenting support groups or support for individual families.

By not offering early intervention, minor needs may well become significant needs which ultimately cost more money - fence at the top of the cliff or ambulance at the bottom?

**Voluntary/Community Organisation**

There would be less intervention. Less 'eyes on the family' and neglect, dv, addiction, family crises' would be unaddressed until we have bigger problems. Schools rely on agencies such as Getset particularly at level 2 so that we can work jointly to support pupils. If we are doing our bit at school and they are returning to families with no lifeline at that level, they will be unlikely to reach age related outcomes and make progress in terms of their emotional literacy. In my experience, if things go unchecked they can quickly fall into chaos, but take an age to put right.

**Special Educational Needs Co-Ordinator (SENCO)**

As previously mentioned a strong theme from the consultation free text responses is around cases escalating to higher levels of need if the support for individual families is removed. In questions 4 to 7 the free text comments also raised that if the parenting support groups and individual support for families led by getset is removed, the added value that getset provide in terms of them observing families attending groups and identifying those families that need individual support will be lost.

Many families who receive support and signposting from Get Set are comfortable accessing services provided by the Staff. This is because they trust them. If that support is not available where will these families go? Who will they trust? The important safeguarding undervalued work done by the Level 2 staff will stop and children will be put at risk. These groups are not just about playing and learning to cook, they are about building trust and allowing access to hard to reach needy families.

**Police and Community Support Officer (PCSO)**

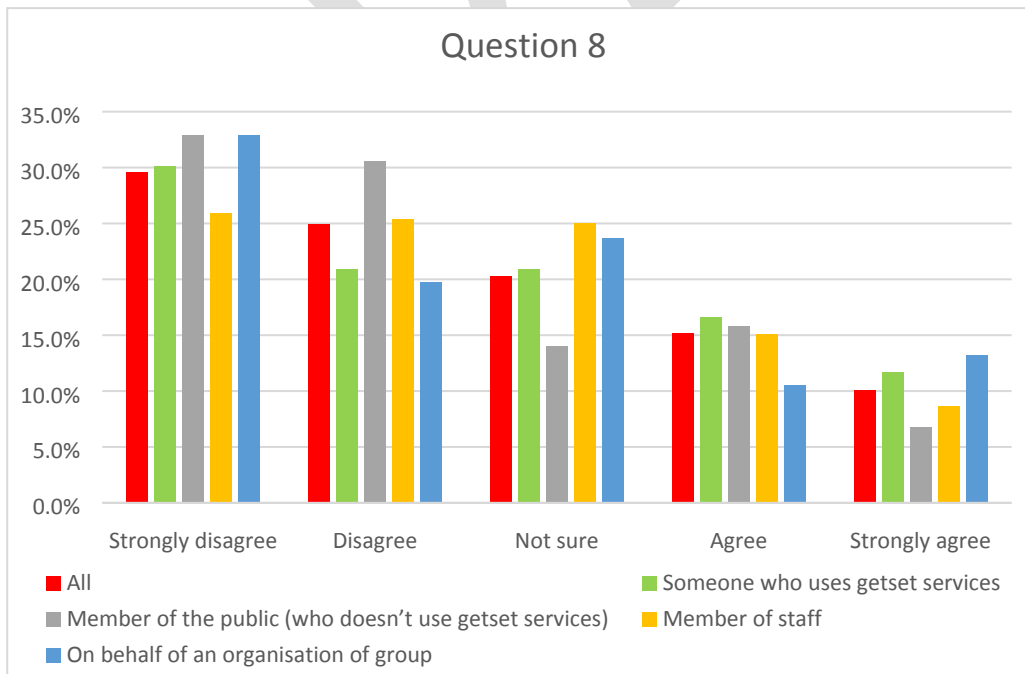
Getset has worked with tremendous success with a significant number of my children and their families. It has increased their life chances and has prevented many families from spiralling into level 3 (and above) need. Of all the services we access, Getset is among the best for outcomes for children in my organisation.

**Head Teacher**

Being a parent of three children who have all needed use of the services of Level 2 due to additional needs, I can tell you that without the help I received I doubt I would be here today. The cuts to level 2 would be a major blow to families like mine who were helped immensely by early intervention and parenting classes. Also the social and emotion support I received was vital. it can't be replaced.

**Someone who uses getset services**

**3.2.5 Question 8** asked “To what extent do you agree with the approach for the council to provide start-up funding to help individuals, groups or voluntary organisations set up and provide some of the support that would cease if these proposals are approved?”



Almost 30% of respondents strongly disagreed with this approach; 45.6% either agreed, strongly agreed or weren't sure.

Volunteers have neither the time to commit nor the expertise to contribute properly. The money is better spent keeping our services running.

**Portage Home Visitor**

If you can provide start up funding for these groups why can't you just keep them running.? The groups you are considering stopping are ran by trained and qualified people. Community groups do not provide the same quality staff.

**Someone who uses getset services**

**3.2.6 Question 9** asked “Would you, or a group, or organisation that you belong to, be interested in providing parenting support groups or support for individual families?”.

168 respondents said “Yes” for Parenting support groups”

133 respondents said “Yes” for Support for Individual families”

However, only 110 respondents left contact details.

### 3.3 Breakdown of demographics

The following tables provide a breakdown of the demographic data from those respondents who identified as someone who uses getset services. This is important information from the families to understand the potential impacts, thereby informing the Equalities Impact Assessment and final proposals.

#### Gender

Do you identify

As a man	16 9.4%
As a woman	140 81.9%
In some other way or no response	15 8.8%

#### Age

What is your age?

18-24	29 17.0%
25-34	64 37.4%
35-49	53 31.0%
50-64	12 7.0%
65+ or no response	13 7.6%

## Disability

Do you consider yourself to have a disability?

Yes	15 8.8%
No	133 77.8%
Prefer not to say	17 9.9%
Blank	6 3.5%

## Universal Credit/Family Tax Credits

Are you in receipt of Universal Credit/Family Tax Credit?

Yes	68 39.8%
No	81 47.4%
Prefer not to say	14 8.2%
Blank	8 4.7%

## Carer Status

Do you provide care for anyone

Yes	57 33.3%
No	100 58.5%
Prefer not to say	10 5.8%
Blank	4 2.3%

# Ethnicity

What is your ethnic group?

White	144 84.2%
Any non-White ethnicity	7 4.1%
Prefer not to say	12 7.0%
Blank	8 4.7%

## Children

How many children in each age group do you have?

Do you have any children?		Children aged 0-1				Total
		1	2	10		
Yes	154 90.1%	92.5%	6.0%	1.5%	100.0%	
No	6 3.5%	Children aged 2-4				
		1	2	3	10	Total
Prefer not to say	6 3.5%	80.5%	15.6%	2.6%	1.3%	100.0%
Null	5 2.9%	Children aged 5-12				
		1	2	3	Total	
		62.9%	35.5%	1.6%	100.0%	
		Children aged 13-16				
		1	2	Total		
		94.1%	5.9%	100.0%		
		Children aged 17-21				
		1	2	Total		
		83.3%	16.7%	100.0%		

\*Does not include people who either said they had 0 children in the age group or who did not respond to the question

105 (61.4%) of the respondents who use getset services said they have access to a car.

79 (46.2%) of the respondents who use getset services said they have access to other forms of transport (including public transport).

133 (77.8%) of the respondents who use getset services said they have access to a mobile phone.

128 (74.9%) of the respondents who use getset services said they have access to the internet.





## **Somerset County Council Response to the public consultation on the proposed changes to the County Council's support and services for children and families**

Somerset County Council (SCC) would like to thank everyone who contributed to the consultation; over 900 people gave feedback with 731 responding via the consultation questionnaire. The results have provided vital information and opportunities to follow up which will help to develop early help support and services in Somerset and inform those making decisions.

Below we have summarised the most common comments made through the consultation and responded to them.

### **1. Summary**

The consultation responses generally show respondents do not want to see cuts to the getset service despite the message in the consultation documentation for the need to make immediate cuts and concentrate scarce resources on statutory services. Responses from some key partners have highlighted the need to have a mixed economy of services and a better co-ordinated offer from a range of partners to more effectively support children and families.

SCC is very pleased to be working more closely with the District Councils to explore greater opportunities to collaborate on community development. In addition, the multi-agency Early Help Commissioning Board has an increasingly strong membership which is actively taking forward the need for effective early help across Somerset.

SCC and partners have agreed that providing early help for families is everyone's business and it is clear that getset have gone above and beyond for families sometimes in the absence of partners meeting their early help responsibilities. This was highlighted by Ofsted in the inspection report published in January 2018:

*Early help, although improved, requires further integration with partners to increase its capacity.*

*Early help services in Somerset have improved, yet are not fully established across the partnership.*

### **2. Our Approach**

Question 2 asked how respondents felt about our proposal to focus funding on children and families with most significant needs.

Your Response	Our response
2.1 Many people felt early help was important and needed to be resourced	We agree and believe there is a wealth of support already in place across all partners but that it is not yet well co-ordinated, signposted or that all partners fully play their part. We invest £17.8m already in providing a range of services (see below) but believe a stronger voluntary and community sector will help to make a greater difference to local areas in a more sustained way.
2.2 Partners responses particularly outlined that families may not have their needs met earlier and will “escalate” to statutory services.	Through the agreed Somerset Early Help Charter and Early Help Strategy all partners in Somerset have agreed that <b>“early help is everyone’s business”</b> and that every agency has a responsibility to support children when issues are first noticed. This cannot be left entirely to the council or the getset level 2 service. We provide other early help services (see appendix 1 below) including the level 3 service which deals with more complex families.
2.3The use of the Early Help Assessment by partners is seen as a barrier to supporting families	The Early Help Assessment (EHA) is the agreed inter-agency assessment tool for Somerset Safeguarding Children Board (as required under Working Together 2018). If completed appropriately by front line practitioners (guidance is provided via the Effective Support for Children and Families in Somerset publication and professional choices) this can help identify the child/family’s needs and what help is required. We have continued to review the EHA with partners and have further plans for continuous improvement.

Discussions have been held between SCC and representatives from the district councils who reported “...**there could be ways that the two tiers could work more effectively with wider partners to deliver good early help services for less cost.**”

***There is a lot of community activity going on at this time, such as One Teams, community hubs and community support groups, all of which could be utilised to build a greater community early help offer***. The group felt that more time was needed to fully understand the impact of the proposals before they were implemented.

The consensus from the One Team / Together Team co-ordinators across Somerset was that ***“a strong locality based, family and child support network of both statutory and voluntary sector agencies would provide a far more effective approach to improving children’s lives”***. This is in line with Somerset’s Early Help Strategy and we support this view, outlining in the consultation proposals the aim to invest more resources in the community and voluntary sector in future. We recognise there is more to do to co-ordinate a coherent approach to identifying and supporting families that need additional help.

### **3. Parenting support groups and support for individual families**

<b>Your response</b>	<b>Our response</b>
3.1 Nearly 90% of respondents had some awareness or were well aware of other groups running in their area	This is reassuring and we are working to ensure this information, and more, is available on Somerset Choices so all families can have this information. We will continue to maintain and update Somerset Choices.
3.2 Some comments highlighted concerns regarding the gap that would be left by removing getset level 2, and how accessible the other range of groups are for families, in terms of geography and cost.	A further analysis of this has been undertaken which has been used to inform the Equalities Impact Assessment. Where there is a gap we will propose what further mitigation can be put in place to minimise any impact. We are keen to invest in the voluntary and community sector to increase local provision, as they are often more agile and innovative in improving outcomes for families. They can then work in collaboration with other public services that are already provided; we recognise this will take time to develop and further short term mitigation may need to be put in place.
3.3 The majority of comments received from families highlighted how well regarded and valued the getset service is, having positive benefits for their children and themselves. Groups run by getset are seen as providing a safe non-judgmental environment for parents to	We are pleased the staff have been recognised for the great work they do with families. The next step is to ensure other groups receive training and support so that they too can provide this.

<p>meet and the family support workers are able to spot potential issues where perhaps others may not.</p>	
<p>3.4 There appeared to be some concern that volunteers are untrained or unable to provide high quality support for children and families.</p>	<p>There are many examples nationally, and in Somerset, where volunteers provide exceptional care and support to children and families with additional and very complex needs, and SCC are keen to support this type of model in future.</p> <p>For example, <b>Home-Start West Somerset</b> currently have over 60 volunteers, 36 of which who are classified as ‘home visiting’ volunteers and mainly offer support to families in their home. All volunteers are checked through the disclosure and barring service (DBS) and follow a robust recruitment process. The majority of volunteers at Home-Start are retired professionals eg lawyers, teachers, nurses and undergo an 8 week induction course before they work with families. The branch use the national Home-Start UK’s quality assurance programme (which is their equivalent to Ofsted) and in their last inspection in October 2017 they achieved 96% which demonstrates a ‘good quality’ standard.</p> <p><b>Safe Families for Children</b> who operate in the Mendip and Yeovil areas are a church-based organisation who are recognised nationally. They have 61 volunteers in total which again are mainly of retirement age and retired professionals.</p> <p>Across <b>6</b> areas nationally, feedback has been collated from service users. against a scale of 1 to 10, 1 being totally unsatisfactory, 10 being outstanding):</p> <ul style="list-style-type: none"> <li>• <b>90%</b> of people responded <b>8</b> or higher when asked - <i>How did you like the help given by Safe Families for Children?</i></li> <li>• <b>94%</b> of people responded <b>8</b> or higher when asked - <i>How did you</i></li> </ul>

	<p><i>like your Safe Families for Children volunteers?</i></p> <ul style="list-style-type: none"> <li>• <b>98%</b> would recommend Safe Families for Children to a friend</li> </ul>
3.5 Some feedback from partners concerned the use of the early help assessment (EHA).	There is still some confusion in partner agencies as to when an EHA should be undertaken. An EHA is not required to attend universal / open access groups. An EHA is only undertaken with full consent of the family where additional help, often needing other partners involvement, is required. SCC continues to support the review of the EHA with partners, provide training and advice through the Early Help Advice Hub, and is considering further ways to improve arrangements to ensure all practitioners are able to engage more fully in meeting their early help responsibilities.
3.6 In a small number of responses, there appeared to be a misunderstanding that there would be no individual case work for families in place	There remains a range of support via casework available at level 2 and 3, from both the council (see appendix 1 below) and other partners eg health visitors and PFSAs for school age children that will continue.
3.7 A petition with over 500 responses was received in relation to the <b>Key Centre in Frome</b> and a concern this would close	Previous decisions made by the council identified the Key Centre as one of the 8 retained family centres, and that is still the case; it will remain open. Health visitors, other council family services and potentially other public sector and community services will be utilising the centre for the benefit of local families.

#### 4. Getting involved

Your response	Our response
4.1 In relation to the question (question 8) regarding <b>start-up funding</b> to help individuals, groups or voluntary organisations set up, there was 54.5% who either 'disagreed' or 'strongly disagreed' compared to 25% who either 'agreed' or 'strongly agreed' and a	The Early Help Commissioning Board, which is a multi-agency group, considered this response and suggested it may be that respondents felt there was little detail of the vision and what the future could look like which meant people were unsure and

<p>further 20% 'not sure'. Some respondents felt strongly that if there was funding available this should go to retaining the level 2 service.</p>	<p>therefore couldn't agree; they could however see what was being proposed to be cut.</p> <p>Following the staff reductions already undertaken in getset the level 2 service consisting of 11 FTE family support workers and apprentices covering the whole of Somerset costs £450k. The Council's view is that by investing an annual £200k in community based local support, this has the potential to become a much larger, more effective and sustainable resource with the ability to attract further funding from other sources.</p>
<p>4.2 There were 110 respondents who gave their details and would like to be involved in supporting early help in the future.</p>	<p>This is a really positive response; thank you to those that left contact details.</p> <p>SCC and the district councils are planning district events in the spring/summer 2019 inviting parish and town councils, local stakeholders and partners including charitable, voluntary and community groups plus the respondents to this consultation. The aim will be to explore local early help opportunities and actions to take forward.</p>

## **Other early help support provided by the Council**

This list provides details of early help support and services that the council provide. This complements the details of groups and activities included in the consultation paper. In addition, practitioners working in universal services eg schools, nurseries, GP practices have a role in identifying and supporting children that may need extra help.

SCC provides early help through its Children with Disabilities Team which offers support to families who have a child with a disability. This includes one to one emotional support, respite and opportunities for children to attend activities.

Team 8 (Community Adolescent Team) provide early help support to adolescents (Year 7 upwards) and their families whose children are experiencing complex (Level 3) issues, such as drug and alcohol misuse, child to parent violence and unhealthy family relationships.

The Special Educational Needs and Disabilities (SEND) Team provide advice and guidance for children and young people who need additional help with learning and who may require an Education Health and Care plan (EHCP). They will also signpost to other relevant organisations.

Parent and Family Support Advisers (PFSA) work in schools providing help for parents and families. They support parents with some of the everyday problems that they might be having with their children so that the children are happy to attend school and engage in their learning. PFSAs support parents with things like behaviour, attendance and health and can signpost families to more specialist support if it is needed.

The Team Around the School (TAS) model is a local network which consists of schools and other support services that meet on a regular basis to have a shared conversation about children and young people that they may be worried about and that early help and intervention may stop concerns escalating. The model provides the infrastructure for agencies to work together to improve outcomes for children, young people and their families.

The Local Authority also provides funding to support to the Early Years sector to ensure sufficient places and to support settings to meet the needs of young children through support and challenge using the Early Years Foundation Stage Statutory Framework.

Support Services for Education (SSE) is a traded unit within Somerset County Council that offers a wide variety of support services to all education and early years providers and other establishments. Their services are funded through the Local Authority to undertake statutory assessments through the Education Psychology

Service. Funding is also provided through Dedicated Schools Grant – High Needs to support education establishments, children and young people 0 – 25 year by providing assessment, support and guidance through the following services: Autism and Communication Service, Educational Psychology Service, Hearing Support Team, Vision Support Services, Learning Support Service, Early Years Areas SENCOs, Portage Home Visiting Service and the Physical Impairment and Medical Support Team (PIMST) (List not exhaustive). More information can be found here: <http://www.supportservicesforeducation.co.uk>

SCC fund health visitors and school nurses and from April 2019 this service will be delivered directly by SCC providing a 0-19 years Public Health Nursing service that supports children, young people and families from conception to adulthood. This is the first step in developing a children and young people's public health service which is place based and closely linked to the communities, organisations and services who can positively influence the factors affecting the life chances of children, young people and families in Somerset.

The council is funding and directly providing a range of level 2 and 3 support services, but recognises that more needs to be done to co-ordinate the range of activities available both within the council and with external partners, and actively plans to address this over 2019.



# Somerset Equality Impact Assessment

Before completing this EIA please ensure you have read the EIA guidance notes – available from your Equality Officer

<b>Organisation prepared for</b>	Somerset County Council		
<b>Version</b>	V8.0	<b>Date Completed</b>	10 January 2019

## Description of what is being impact assessed

### Proposals for the alteration and/or reduction of early help services provided to children and their families.

The Council is proposing to reduce some of the support currently provided for children and their families by the Council's getset service. The support that would be reduced is mostly for families with children aged 0 to 4 who have Level 2 additional needs as set out in the Somerset Safeguarding Children Board's [Effective Support for Children and Families in Somerset guidance](#).

Early help means providing support as soon as a problem emerges, at any point in a child's life. Effective early help relies upon families, communities and local agencies working together to identify and assess the need for early help.

Level 2 describes children and families who require some extra support in addition to what every child receives, to help them reach their potential. This may be short term, but requires a targeted service to support the child and family.

The Council's getset services are part of Somerset's early help offer and is delivered in 2 parts:

- Level 2 - Work with children and families with 'additional' needs, aged 0-4
- Level 3 - Work with children and families who have 'complex' needs aged 0-19 and this work requires support from different organisations working together.

Please note: Early help is not the help and support that children and families get when they have serious difficulties and require statutory interventions including children's social care. This help and support, including that from getset Level 3, is unaffected by these proposals.

The work that getset level 2 undertake can be grouped together:

## Parenting support groups (including parenting programmes)

Groups can be offered in 2 ways:

Universal provision – Groups that support the population as a whole. These services are available to all children, young people, and their families. They can be accessed without any type of assessment.

Targeted provision - These are for children, young people and their families who may need additional support to access services, or may need groups or services that are specifically designed to meet their needs. Some targeted provision can be accessed directly with or without an assessment.

There are different groups which can be explained below:

Bumps and Babes	Universal – Group for parents to be and parents with babies under 18 months.
Messy Play Stay, Play and Learn	Universal - Group for parents to come together with other families to have fun playing and learning with their children (aged under 5).
PEEP (Peers Early Education Partnership)	Targeted - Learning together programme supporting parents and children to learn together.

## Support for individual families

This work involves direct, one-to-one support with individual children and families. It involves establishing relationships and working closely with families to carry out an assessment, which is called an Early Help Assessment) which is used to help discuss what support is needed to get families back on track and to make positive changes to their lives.

## FUTURE PROPOSAL

- Retain getset level 2 team until March 2020 providing support to children with some additional needs at level 2 and their families by delivering group work and some key parenting programmes in areas identified as greatest need.
  - The team will move to providing group work and building resilient community settings, rather than individual case work, working alongside other key agencies that support 0-4 year olds eg health visitors and Early Years settings enabling more families to be supported.

- The team will provide some key parenting programmes and groups
- The team will deliver a “train the trainer” model for evidence based parenting programmes open to any community / voluntary group to enable them to identify and support more vulnerable families and run parenting programmes
- The team will align with the Public Health Nursing teams and be allocated across the 8 family hubs; they should act as community agents and help partners through training to identify and provide support for families so that partners can continue this once the getset level 2 service ends in March 2020.

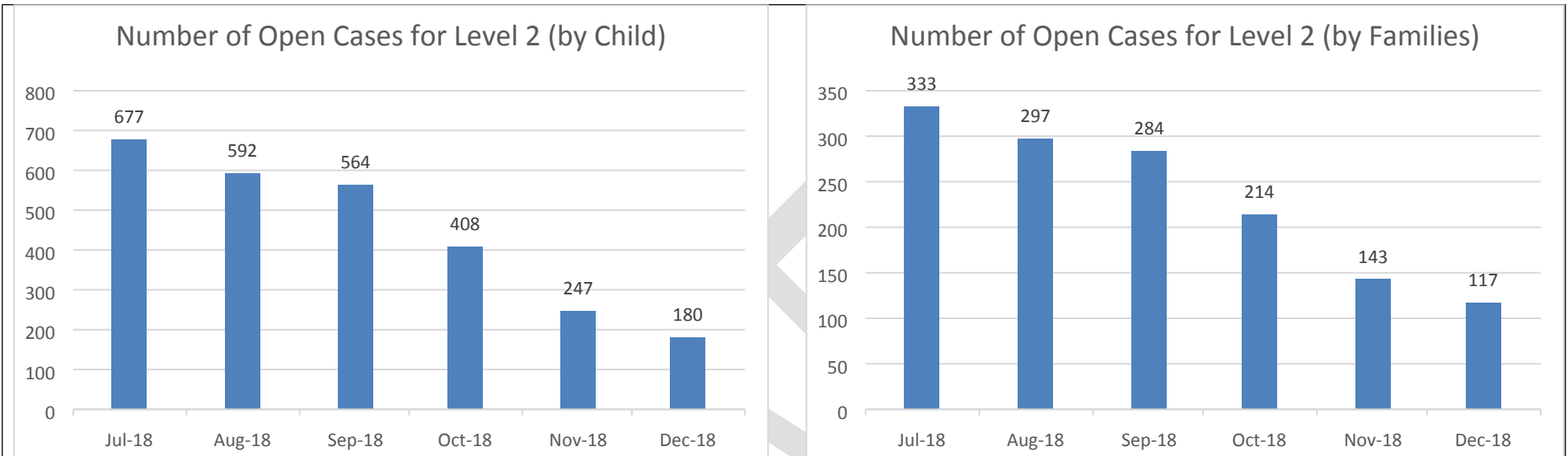
NB these proposals form part of a larger programme of activity to improve Somerset’s early help approach.

Impacts on staff have not been considered as part of this assessment due to the low numbers of staff affected. Any consideration around changes to staffing and impacts upon them will be dealt with separately through HR policy and practice and via a collective consultation with the unions.

## Evidence

**What data/information have you used to assess how this policy/service might impact on protected groups?** Sources such as the [Office of National Statistics](#), [Somerset Intelligence Partnership](#), [Somerset’s Joint Strategic Needs Analysis \(JSNA\)](#), Staff and/or [area profiles](#), should be detailed here

## Current demand of getset Level 2 Service



### Open cases and caseloads

The following graphs show the Level 2 open cases, by child and by family since July 2018.

The revised staffing structure in getset level 2 was implemented from the 1 January 2019:

- July - December 2018 = 30 FTE (full time equivalent)
- January 2019 = 11 FTE

Using the above staff numbers the average caseload for a worker in July 2018 can be calculated by using the figure of 333 families divided by 30 FTE which equates to 11.1 families. In December this has reduced to 117 families divided by 30 FTE which equates to 3.9 families.

It is worth noting these calculations are based on establishment rather than headcount. From January 2019 the Level 2 establishment has reduced to 11 FTE which if using December's data would equate to a caseload of 10.6 families per worker. This remains well within the agreed caseload figures of 1:20.

### Age breakdown of cases

The level 2 cases (as at December 2018) can be broken down further to show the split of the cases across the 4 geographical

areas and shows unborn children and up to the age of 4 years being worked with.

Age	Mendip	Sedgemoor	South Somerset	Taunton & West Somerset
Unborn	1	3	3	1
0 to 4	32	20	43	55

#### Gender breakdown

The table below shows the breakdown for children with open cases by gender (As at December 2018).

	Level 2 (Children)
Female	66
Male	79
Unknown	1
Unborn	8

#### Disability data

The level 2 cases (as at December 2018) shows that 3 children had a disability.

#### Ethnicity data

The table below shows the breakdown for children with open cases by ethnicity level 2 cases (as at December 2018)

Ethnic Group	Children
Any Other Ethnic Group	1
Asian/Asian Bri - Other Asian	2
Black or Black British - African	1
Client Declined	2
Filipino	1

Mixed - Other Mixed Background	2
Mixed - White & Asian	1
White - British	123
White - Other Cultural Background	1
White - Other European	1
Unknown	19

### Parenting Support Groups

The following tables show attendance at the getset led parenting support groups across the 5 geographical areas.

Area	Group	01/01/2018 - 31/03/2018			01/04/2018 - 30/06/2018			01/07/2018 - 30/09/2018			01/10/2018 - 31/12/2018		
		No. of times group occurred	No. of 0-4 children attended (0-4)	No. of carers attended	No. of times group occurred	No. of 0-4 children attended (0-4)	No. of carers attended	No. of times group occurred	No. of 0-4 children attended (0-4)	No. of carers attended	No. of times group occurred	No. of 0-4 children attended (0-4)	No. of carers attended
Mendip	Bumps and Babes	15	45	45	19	46	57	11	31	34	15	28	33
	Messy Play	10	16	17	0	0	0	2	14	12	0	0	0
	PEEP	0	0	0	0	0	0	0	0	0	0	0	0
	Stay, Play & Learn	63	151	140	56	140	133	28	140	128	22	79	81
<b>Mendip Total</b>		<b>88</b>	<b>212</b>	<b>202</b>	<b>75</b>	<b>186</b>	<b>190</b>	<b>41</b>	<b>185</b>	<b>174</b>	<b>37</b>	<b>107</b>	<b>114</b>
Sedgemoor	Bumps and Babes	11	13	17	12	13	20	10	16	17	12	7	7
	Stay, Play & Learn	21	57	58	23	53	54	15	32	30	19	31	27
<b>Sedgemoor Total</b>		<b>32</b>	<b>70</b>	<b>75</b>	<b>35</b>	<b>66</b>	<b>74</b>	<b>25</b>	<b>48</b>	<b>47</b>	<b>31</b>	<b>38</b>	<b>34</b>
South Somerset	Bumps and Babes	0	0	0	0	0	0	3	1	1	9	7	9
	PEEP	38	54	59	47	49	57	10	19	21	6	6	10
	Stay, Play & Learn	35	70	69	24	55	51	9	38	30	17	36	32
<b>South Somerset Total</b>		<b>73</b>	<b>124</b>	<b>128</b>	<b>71</b>	<b>104</b>	<b>108</b>	<b>22</b>	<b>58</b>	<b>52</b>	<b>32</b>	<b>49</b>	<b>51</b>
Taunton Deane	Bumps and Babes	29	41	45	24	33	37	23	35	39	27	15	17
	Drop in	0	0	0	0	0	0	0	0	0	0	0	0
	PEEP	9	12	12	2	1	1	0	0	0	0	0	0
	Stay, Play & Learn	37	130	137	33	99	97	23	90	101	32	51	49
<b>Taunton Deane Total</b>		<b>75</b>	<b>183</b>	<b>194</b>	<b>59</b>	<b>133</b>	<b>135</b>	<b>46</b>	<b>125</b>	<b>140</b>	<b>59</b>	<b>66</b>	<b>66</b>
West Somerset	PEEP	0	0	0	5	10	8	2	6	5	0	0	0
	Stay, Play & Learn	35	126	125	32	85	82	26	53	56	24	31	28
<b>West Somerset Total</b>		<b>35</b>	<b>126</b>	<b>125</b>	<b>37</b>	<b>95</b>	<b>90</b>	<b>28</b>	<b>59</b>	<b>61</b>	<b>24</b>	<b>31</b>	<b>28</b>
<b>Grand Total</b>		<b>303</b>	<b>715</b>	<b>724</b>	<b>277</b>	<b>584</b>	<b>597</b>	<b>162</b>	<b>475</b>	<b>474</b>	<b>183</b>	<b>291</b>	<b>293</b>

Appendix 1 of the public consultation listed other groups and activities that are run by other people or organisations that provide the same kind of support for children and families. The list below shows how many groups are based in venues linked to a faith. This

shows that there are other groups and activities for people with religious/non religious beliefs.

Area	Total number of groups	Groups based in venues linked to a faith
Mendip	109	23 (21.1%)
Sedgemoor	84	12 (14.2%)
South Somerset	111	35 (31.5%)
Taunton	57	11 (19.2%)
West Somerset	60	11 (18.3)

### **Consultation responses**

The public consultation ran for 8 weeks and over 900 responses were received. Over 1,200 free text comments, were analysed to identify the key themes emerging from the responses. The full report, analysis and breakdown of demographics can be [seen here](#).

#### Some key highlights from the consultation:

- 171 responses were from someone who uses the getset service. At any one time, over the last 12 months, an average of 299 families at Level 2 were receiving individual support from getset staff; which equates to 57% which is a good representation of getset users.
- The largest response was 235 (32%) which were members of staff either from SCC or the wider children's workforce.
- The strongest theme from the free text fields was that early help and prevention is key to preventing families' needs escalating and requiring higher levels of care.
- 89.6% of respondents had 'some awareness' or were 'well aware' of the parenting support groups currently available across Somerset, which is reassuring.
- Across all districts over 60% of respondents said there would be either a 'notable impact' or a 'significant impact' on individuals, organisations and communities if parenting support groups were stopped
- Across all districts over 65% of respondents said there would be either a 'notable impact' or a 'significant impact' on individuals, organisations and communities if support for individual families was stopped.
- Over 80% of respondents who were users of the getset service were women.

**Who have you consulted with to assess possible impact on protected groups?** If you have not consulted other people, please explain why?

In an attempt to ensure that the views of traditionally under-represented areas of the community were captured and considered, specific programmes of activity were developed as part of the consultation process. Diversity Voice were commissioned to translate the consultation paperwork into Portuguese, Polish and Romanian and then engage with relevant families in these communities. This resulted in at least 56 consultation questionnaires being completed by nationalities including the above as well as Bulgarian, Lithuanian, Danish and French.

Responses received through the online consultation:

- 15.0% were men
- 73.7% were women
- 7.0% considered themselves to have a disability
- 27.2% defined themselves as a 'carer'
- 17.2% were in receipt of universal credit/family tax credit
- 73.6% has children
- 78.5% had access to a car
- 39.9% had access to transport (including public transport)

### Analysis of impact on protected groups

The Public Sector Equality Duty requires us to eliminate discrimination, advance equality of opportunity and foster good relations with protected groups. Consider how this policy/service will achieve these aims. In the table below, using the evidence outlined above and your own understanding, detail what considerations and potential impacts against each of the three aims of the Public Sector Equality Duty. Based on this information, make an assessment of the likely outcome, before you have implemented any mitigation.

Protected group	Summary of impact	Negative outcome	Neutral outcome	Positive outcome
Age	<ul style="list-style-type: none"> <li>• There could be a disproportionate impact on young parents who are more likely to require additional support and guidance around parenting skills.</li> <li>• The impact of not providing support and guidance to parents/carers with children aged 0-4 could increase the need</li> </ul>	☒	☐	☐



	for those families. This could see an increase in families presenting for level 3 and 4 services.			
<b>Disability</b>	<p>getset is open to all children which can include children with special educational needs and disability (SEND).</p> <p>SCC also provides early help through its Children's with Disabilities Team which offers support to families who have a child with a disability. This includes one to one emotional support, respite and opportunities for children to attend activities. The Special Educational Needs and Disabilities (SEND) Team provide advice and guidance for children and young people who need additional help with learning and who may require an Education Health and Care plan (EHCP). They will also signpost to other relevant organisations to provide support.</p> <p>Support for parents with learning disabilities or literacy skills could be reduced which would mean their ability to be able to engage in additional support and guidance would be reduced.</p> <p>SCC Adults Learning Disabilities Service support adults with learning disabilities of a working age and older people who have disabilities, mental health problems, or a sensory loss.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Gender reassignment</b>	On review of the data we don't foresee any disproportionate impacts on this group.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Marriage and civil partnership</b>	On review of the data we don't foresee any disproportionate impacts on this group.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

<b>Pregnancy and maternity</b>	On review of the data we don't foresee any disproportionate impacts on this group.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Race and ethnicity</b>	Reduction in support of level 2 provision could result in an increase in demand on level 3 and 4. This increase in demand could result in staff not having as much time to support service users. For service users who have English as a second language this may impact on the time available to communicate through an interpreter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Religion or belief</b>	On review of the data we don't foresee any disproportionate impacts on this group.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Sex</b>	Current data on open cases show slightly more male children requiring support than females.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Sexual orientation</b>	On review of the data we don't foresee any disproportionate impacts on this group.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Other, e.g. carers, veterans, homeless, low income, rurality/isolation, etc.</b>	<p>The removal of level 2 support for socially isolated and vulnerable groups in Somerset could lead to increased isolation and vulnerability for these groups.</p> <p>The removal of level 2 support for families on low income in Somerset could lead to increased isolation and vulnerability for these groups. This group is less financially able to access additional support and guidance where there is a fee attached.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Negative outcomes action plan</b>				
Where you have ascertained that there will potentially be negative outcomes, you are required to mitigate the impact of these. Please detail below the actions that you intend to take.				
<b>Action taken/to be taken</b>	<b>Date</b>	<b>Person responsible</b>	<b>How will it be monitored?</b>	<b>Action complete</b>
<b>NB A set of proposals to improve Somerset's early help approach is being developed, subject to cabinet approval in February 2019 and will then form a detailed project action plan. Main proposals are:</b>				
Retain getset level 2 team in its current form, for the implementation period until March 2020 providing support to children with some additional needs at level 2 and their families by delivering group work and some key parenting programmes in areas identified as greatest need				
Continue to work with schools to develop the Team around the School model, ensuring it is fully embedded and reporting performance to assess impact. Consider feasibility to extend the model to cover ages 0-4 and 16+ ie wider remit than those of school age				
Empower parents/carers to be confident in utilising self-help methods to increase self reliance, in line with SCC's digital strategy, by signposting families via Somerset Choices and the local offer				
Redesign and resourcing of Somerset Direct (SD) to be first point of contact for young people and families (based on adults model) providing advice and guidance, only referring onto the Early Help (EH) Advice Hub if appropriate				

Remodel EH Advice Hub as one multi-agency support and triage point providing support and training for professionals and for families requiring further telephone advice				
Assess requirements for implementing the Early Help Case Management (EHM) portal and / or roll out EHM to a wider group of professionals across partners to support them in early help work with families				
Undertake further development of the current Early Help Assessment (EHA) into a digital form enabling quicker and simplified process for all practitioners				
Establish an annual £200k commissioning / grant fund (which could be increased with other partners financial contribution eg CCG, district councils) that would initially be focused on mitigating gaps identified by cessation of getset level 2 for example investing in parenting programmes, and consideration to establish a children's version of community connect and community catalyst model (based on successful implementation and learning from adults commissioners)				
Develop stronger, collaborative relationships with district councils working in partnership to develop and deliver a community development offer.				
Collaborate with partners and larger voluntary and community sector provision eg Homestart, Safe Families, Yeovil4Families, YMCA etc to identify further opportunities				

Strengthen the multi-agency Early Help Area Advisory Boards in each district council area to understand local needs, undertake local audit of provision and identifying gaps and prioritising early help action in their areas. This will allow integration with the emerging Neighbourhood model.				
Utilise Somerset Choices and the SEND Local Offer as key resource of information, advice and guidance to families by ensuring community groups, support and activities are widely publicised, thereby supporting individuals to help themselves and promote independence				
Remodel and integrate children's services level 3 services in line with Peopletoo recommendations.				
Retain a separate Children with Disabilities level 2 and 3 team and explore integration with the and explore integration arrangements with SEND and the NHS to provide a coherent offer neighbourhood offer				
Remodel the Education Welfare Service to support the schools funded L2 service				
Test a business case to implement the national model of Pause in Somerset - a programme of support to vulnerable mothers who have, or are at risk of, repeat removals of children being taken into care				
Strengthen multi-agency EH Strategic Commissioning Board				
Continue to embed Troubled Families (TF) approach and				

strategic outcomes across partners				
Improved information sharing and continued development and use of the TF data warehouse to provide intelligence on need and allow targeting of resources				
Continued development and awareness raising of early help “tools” ie Early Help Assessment, portal/access to EHCM, professional choices, effective support guidance				
Continue to train and develop the early help workforce				
<b>Other actions:</b>				
Users with SEND can access support and guidance from the Early Support Team and the Resources Team within the Children with Disabilities Team as well as the Early Help Advice Hub	Ongoing	Children with Disabilities Team/Early Help Advice Hub		
A co-ordinated ante natal and post natal offer of individual support around breastfeeding will be available through maternity and public health nursing services, this is tailored to individual needs and linked to specialist services (for example drugs and alcohol or children’s social care) where required	Ongoing	Maternity and Public Health Nursing		
School readiness starts at birth, with the support of parents and caregivers, when children acquire the social and	Ongoing	Early Years Commissioners		<input type="checkbox"/>

emotional skills, knowledge and attitudes necessary for success in school and life. Closely monitor take up of targeted 2 year old funding for child care.				
<b>If negative impacts remain, please provide an explanation below.</b>				
Effectiveness of early help interventions across the partnership needs to be closely monitored, as the combined effect of the proposed reductions and mitigating actions is difficult to assess with any accuracy. It is likely that some families will receive reduced support.				
<b>Completed by:</b>	<b>Children's Commissioning Team</b>			
<b>Date</b>	<b>16<sup>th</sup> January 2019</b>			
<b>Signed off by:</b>				
<b>Date</b>				
<b>Equality Lead/Manager sign off date:</b>				
<b>To be reviewed by: (officer name)</b>				
<b>Review date:</b>				

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