

FAMILY SAFEGUARDING IN SOMERSET – Implementation update

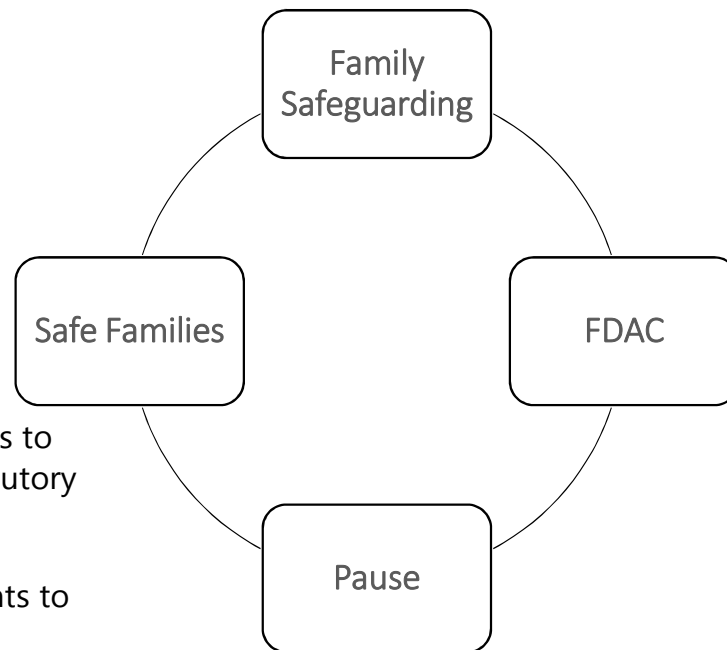
**SCRUTINY
JUNE 2022**



SOMERSET
County Council



FAMILY SOLUTIONS



Safe Families - aims to reduce demand on statutory children's services by providing community-based support to parents to enable them to help themselves and become more resilient in a sustainable way.

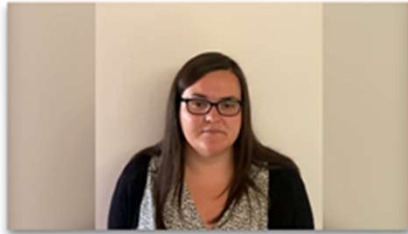
Family Drug and Alcohol Court (FDAC) – an alternative problem-solving court for care proceedings for families where drugs and alcohol are a significant factor. FDAC focusses on motivating parents to take responsibility for making changes to their own lives and working towards achieving abstinence from substance misuse to improve their children's lives.

Pause - a voluntary programme for women who have experienced repeat removals of children from their care. It aims to reduce the number of children being removed into care by working with women who have had children removed to improve their wellbeing, resilience, and stability before they become parents again.

Safe Families



Family Drug and Alcohol Court (FDAC)



Pause

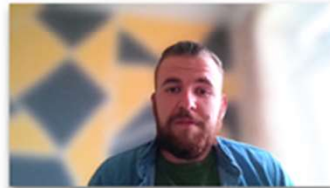


"where families lead change"

Family safeguarding model



Social Worker



Senior Recovery Worker



Domestic Abuse Worker



Adult Mental Health Worker

WHAT IS FAMILY SAFEGUARDING?

Bringing adult workers into integrated teams within children's social care to strengthen the whole family so that children can remain with birth families and not come into care.

- Nationally recognised model to enable families to stay together and reduce the number of children in care
- Delivers support to families when they need it, reducing system escalation, dependence and long-term trauma using motivational interviewing techniques
- Presents an opportunity for a culture shift – innovation, empowerment and staff feeling more valued
- Wider system impact. Reduced demand on emergency services (NHS & the Police), prevention savings to Adult Services (Mental Health & Drug services)
- Addresses Ofsted's criticisms of 'less than good' multi-agency working between services for vulnerable families - improving lives faster

WHY IS FAMILY SAFEGUARDING RIGHT FOR SOMERSET?

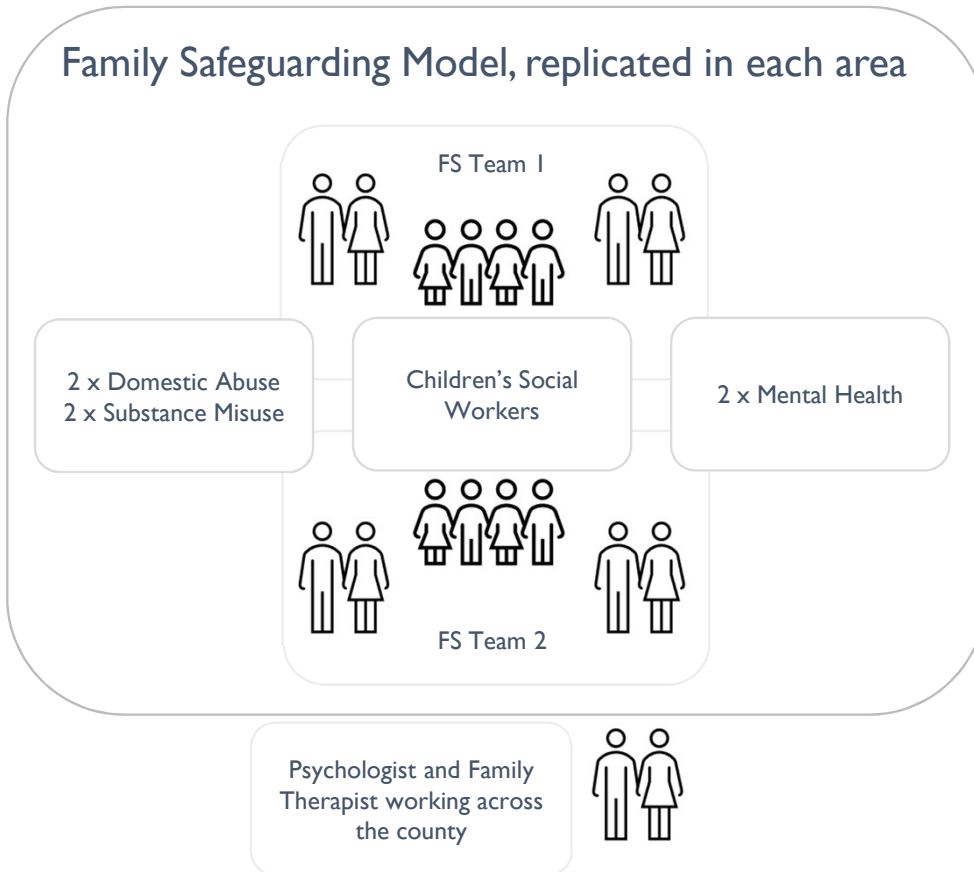
'Improving the conditions for vulnerable children across Somerset is best achieved by improving the life chances of the most vulnerable fastest.' (2016/16 Somerset JSNA – children and young people)

<http://www.somersetintelligence.org.uk/cyp/>

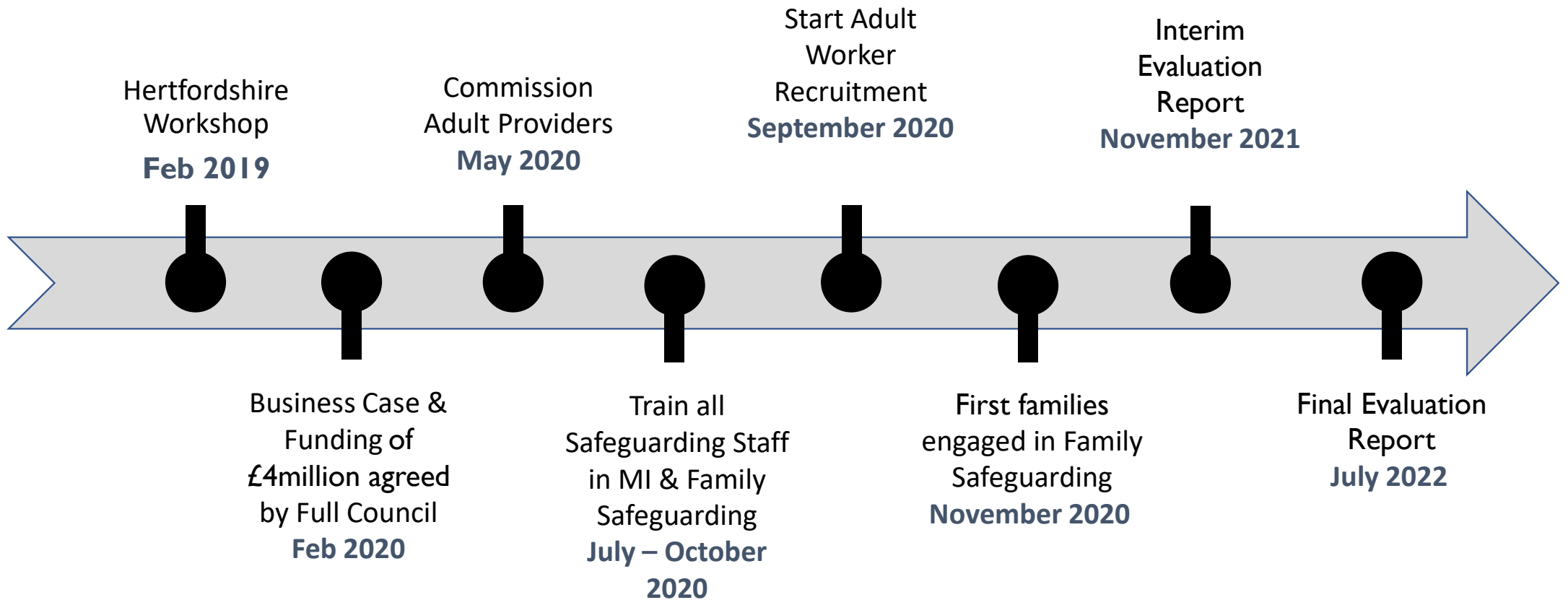


WHAT DOES THE MODEL LOOK LIKE IN SOMERSET?

Family Safeguarding Model, replicated in each area



TIMELINE



WHAT HAVE WE LEARNT SO FAR?

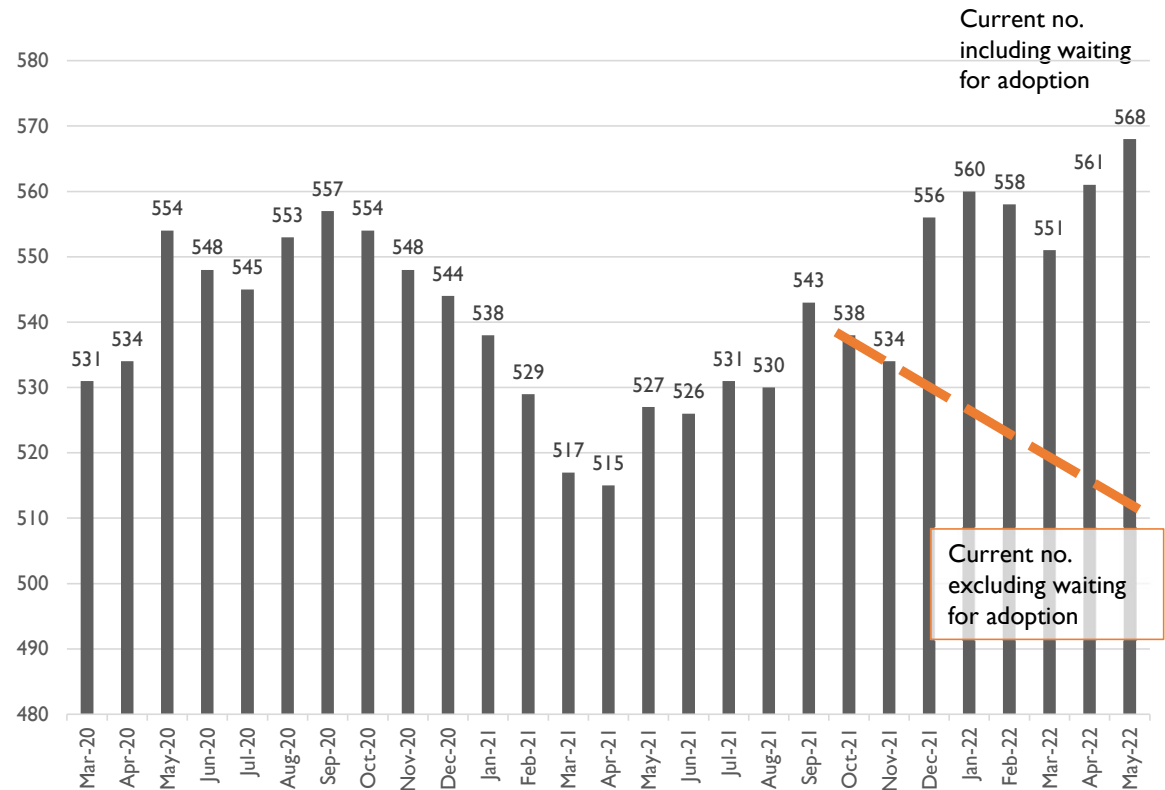
STRENGTHENING PARTNERSHIPS

- Collaboration with providers on project development and launch
 - Turning Point (Substance Misuse)
 - The You Trust (Domestic Abuse)
 - Rethink, Open Mental Health (Mental Health)
 - mind
 - The Balsam Centre
 - Second Step
- Collaboration with NHS Foundation Trust and Open Mental Health
- Collaboration with Adult Services
- Joint provider recruitment



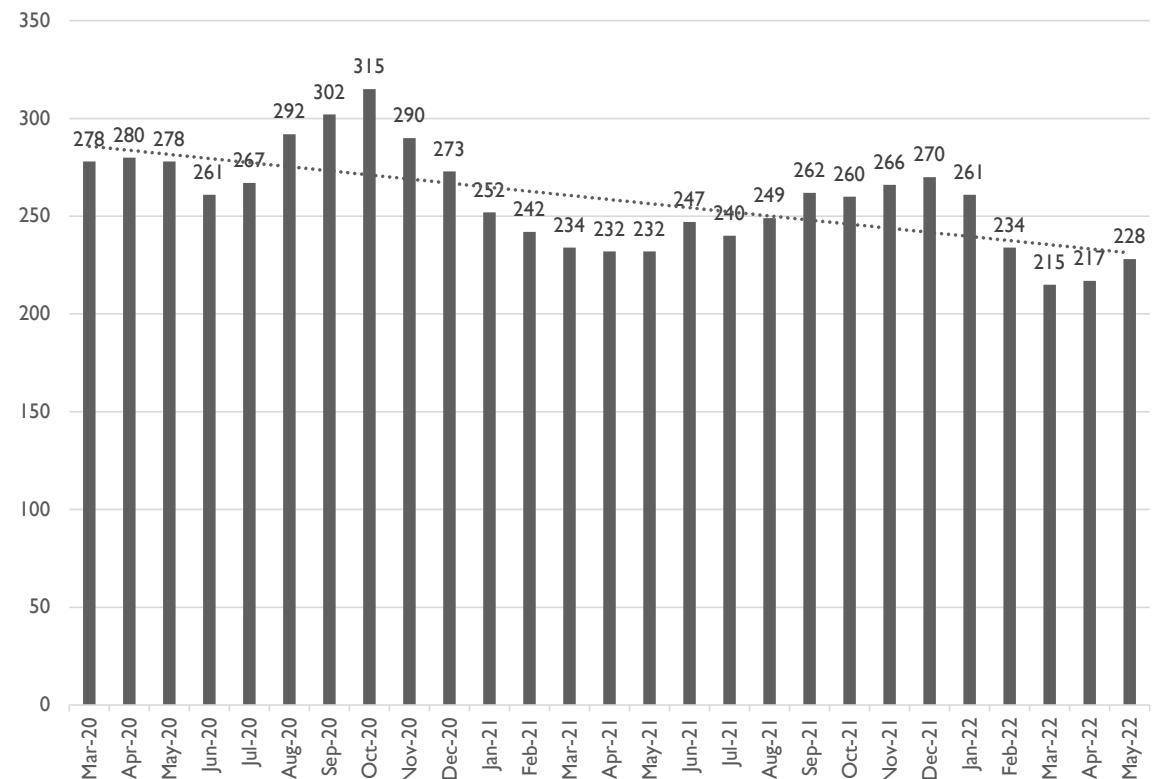
NUMBER OF CHILDREN LOOKED AFTER

- The rate per 10,000 has increased slightly to 51 in May '22 from 49.9 in November 2020. Somerset's statistical neighbours have a higher rate of 59.5, while England has a much higher rate of 65.4
- The latest figures are higher due to delays in local adoption processes caused by technical issues. Once these children move out of care, the downward trend will continue, as shown by the dotted orange line.
- This would represent a rate similar to April 2021 of 46.2



NUMBER OF CHILD PROTECTION PLANS

- The average number of child protection plans has reduced from 285 (March – Nov 2020) to 251 (Oct – Mar 2022). The rate per 10,000 has reduced from 26.4 in Nov 2020 to 20.4 in May 2022. Somerset's statistical neighbors have a rate of 42 and England's rate is 43.7.
- Somerset's percentage of children becoming subject to a 2nd or subsequent CP plan within 2 years of the first is 19.9% over the last 12 months, compared to 23.8% with our statistical neighbours – this shows that most of our interventions are successful first-time round.



POSITIVE IMPACT



Shining a light on excellence

The positive support that families have experienced continues to shine through, and it is clear they feel listened to by their workers who are there for them when needed. Where we recognise what families do well and are clear about what needs to change, this provides the platform for a trusting relationship. Perseverance has paid off where relationships can be more challenging to build. These are some comments that have been made in recent months:

"My worker was extremely helpful and I know that I can contact her if I have any further questions"

"Every time I needed someone to talk to, she's there"

"She was really understanding of me and my keeping all the children safe"

"She has been brilliant and has helped us so much"

"In a way it was good having a social worker as they helped you when things are wrong"

CASE STUDY

- Jasmine has had 4 previous children removed due to the impact of her clinical depression, use of alcohol and domestically abusive relationships on her ability to safely parent her children.
- She is now pregnant and has a new partner, Steven. A pre-birth assessment identified continued concerns about mental health issues for her and her partner and an apparent lack of motivation to work with professionals who could help them make changes. This led to a pre-birth child protection plan and consideration of care proceedings at birth.
- Family safeguarding team became involved. Drug and alcohol worker quickly established that Jasmine had stopped taking her mental health medication early in pregnancy as she was worried it may affect the baby. He was able to reassure Jasmine, with the midwife, that she could use this medication in pregnancy and to support her to think about what needed to change so she could look after her baby.
- As the couple's confidence built in their relationship with the social worker and drug and alcohol worker, they were able to talk about their use of alcohol and cannabis to manage their feelings and worries. With support, Jasmine and Steven have been able to identify that Steven needs some mental health support too and he is now linked to an Open Mental Health worker.
- Jasmine also undertook work on her self-esteem which has helped her to reflect on her previous relationships and how she and Steven can support each other as parents.
- As a couple Jasmine and Steven have been supported to reduce their alcohol and cannabis use and are now proud that they do not feel they need to drink at all anymore.
- The child protection plan has ended and there is no longer a need to consider care proceedings.
- The family safeguarding team will remain involved post birth to support with healthy relationships work and relapse prevention to support the couple to be able to care for their baby independently.



FAMILY FEEDBACK

I like that I am not restricted to a strict programme and the **adult workers listen to what I need** and they see me face to face (not just over the phone). **I feel with the other services if I don't fit into their programme, they can't help me or I have to wait so long to get anything, its pointless.**

Why didn't you lot do this before? It really helps

My mum trusts you, so I want to tell you what I think.

I thought I'd blown it but I was told that relapse is part of recovery and while I know what I did is not ok, **I'm grateful to be given another chance and show them (CSC) that I can be a good dad to my baby. That's all I want.**



SOCIAL WORKER FEEDBACK

We had a parent alleging domestic abuse and we were able to immediately call in the domestic abuse worker first for advice, and then to contact the parent directly and arrange a safe place for the parent to go to. This immediate assistance is so different from our previous experience as external services are often not easily accessible or responsive.

Having the adult workers has enabled me to get the support services for parents much more quickly. **The feedback from parents has been really positive – they feel that they are getting the support in a much quicker, more timely way.** The ability to form the relationships on a one to one basis is so much more helpful.

Both parents being supported by Adult workers (and now through FDAC) have shared that, despite there being a long way to go, they are finding the support and intervention in place really supportive and encouraging. Although the level of involvement can feel a lot to manage at time, they truly feel involved in the planning, that has helped them find their voices and that they now feel optimistic that things can and will change.

Having access to a substance misuse worker and a mental health worker has enabled me to support a parent to access the support she needs in a timely fashion, ensuring that there is a solid plan in place to help her overcome the difficulties she is facing.

Having support from adult workers has reduced the risks to the child and prevented the need to escalate to care proceedings.

*When we worked with external services, it could often take a long time and we would lose the momentum and the parents would often lose faith and disengage. The adult workers are flexible and if something doesn't work, they try something different. **We think together as a team and we work out together with the parents what would be the most helpful intervention.***

ADULT WORKER FEEDBACK

I am new to the role. I love working in the team and am really excited about how it will progress. I can already see the benefits of this way of working and how helpful it is to be able to get with families quickly to start addressing their need around drugs and alcohol before it escalates to crisis. **This is going to really help us support parents to reduce their substance misuse while keeping their children safe and in their care. Very positive experience so far.**

I love the way that I can just be with a parent. I can listen to them, giving them the time and space they need to tell me what they want. **We put together a programme of intervention to suit them but if this changes, I can adapt it as we go along.** I like the way I don't have to stick to a specific plan; if the need changes, I change with it. It can be so flexible. We adapt to the client; they don't need to adapt to us.

I am new to the team and everyone has been so helpful and welcoming; **I feel like I am really part of the team, but I have maintained my identity as a mental health professional and am learning so much about working with a family as a whole.**



EVALUATION

- SCC have commissioned York Consulting to do the following:
 - Evaluation to understand the effectiveness of the Family Safeguarding Model in Somerset, with particular focus on workforce and family experience.
 - Cost – benefit analysis of the model.
 - To allow an assessment of the sustainability of the model and inform planning for future service development.
- York Consulting evaluated Family Safeguarding in Hertfordshire, Bracknell Forest, Luton, Peterborough and West Berkshire and are currently evaluating in Surrey
- Primary research with practitioners started in March 2021
- Primary research with families started in April 2021
- Regular data capture from SCC for quantitative analysis
- Interim Report November 2021 identified staff enthusiasm and commitment to model and families changing.
- Final report expected June 2022



INTERIM REPORT HEADLINES

- The introduction of greater **multi-disciplinary working** has been extremely well received and is regarded as a central tenet of the model. Practitioners are confident that it will lead to positive outcomes for families and is the right way of working.
- The changes to working practices imposed by **the pandemic** have not all been disadvantageous. On the contrary, practitioners said that attendance at case-related meetings had improved, that they had become more productive because they were travelling less and that some families were more likely to willingly engage via remote communication.
- Practitioners were very positive about **Motivational Interviewing**, with a large majority of survey respondents (88%) viewing it as an effective tool for working with families.
- Almost all practitioners (98%) said that **communication** within their team was effective, while 93% said they felt confident about raising concerns with their manager.
- **Group Case Supervision** is also held in high regard: 90% of practitioners agreed that it results in a better shared understanding of risk, while 84% said it allows better decisions to be made for families.
- Levels of **job satisfaction** among the Family Safeguarding workforce are high: 93% said they are satisfied with the job they do. The number of **staff vacancies** among the Family Safeguarding teams has reduced significantly since mid-2020.

ISSUES FOR CONSIDERATION – 1.THE PANDEMIC

- The pandemic sped up the planned implementation of the Family Safeguarding in Somerset, which was originally a 2 stage process starting in half the county, and became a whole county implementation.
- However, it took longer to fill some posts. Recruitment to Domestic Abuse and Drug and Alcohol posts was faster, but a lack of specialist staff in mental health led to a delay. This was resolved by linking with the innovative partnership Open Mental Health.
- Remote working has meant we have needed to be more creative to share Family Safeguarding related learning and means that working relationships – both between practitioners and with families – took longer to establish.
- However, working relationships are reported to be very positive, and the access to specialist workers has been particularly welcomed and supported.

“The social work team are an absolute pleasure to work with. I feel extremely supported by them and valued. They have welcomed me, and we work extremely well together.” (Practitioner)

ISSUES FOR CONSIDERATION – 2. THE WORKBOOK

- More than three quarters (77%) of survey respondents were using the Workbook, but less than one third (28%) said it was improving their practice.
- People also regularly highlighted (what they perceive to be) the time-consuming nature of the Workbook. Practitioners are questioning the balance between the administrative requirements of the Workbook and the value or benefits it derives.
- The Workbook is an integral part of the Hertfordshire model, and it is expected that it will be used by all authorities implementing Family Safeguarding.
- We are aware the workbook has been identified as an issue in the other authorities (all evaluated by York) – we are working with Hertfordshire to improve the system.
- Individual-level data has taken some time to be extracted from the workbook and is now being used to understand performance. Somerset's work on this has been identified by York Consulting as a model of good practice to be used nationally.

“ Doing the work is the easy part – recording is the issue.” (Practitioner)

ISSUES FOR CONSIDERATION – 3. COMPLEXITY

- Practitioners were in general agreement that their caseloads were, on average, becoming more complex.
- This was attributed to the impacts of Covid-19 and the emerging multiple and entrenched issues within some families.
- Complexity has been identified as a national issue, seen across casework, in different teams, in all local authorities.



Any
Questions?