

Education and Children's Services Scrutiny Committee 11/9/14 Making Every Intervention Count: Key Focus Areas

What is the overriding strategy for children's services? What are the key issues / priorities?

CYP vision - 'To enable all children and young people in Suffolk to aspire to, and achieve, their full potential, giving them the basis for a successful life as active members of their community',

Cabinet Member Priorities	
Children Services and Health - Improve the IMPACT that services have on creating CHANGE for children and families	Key Focus for Making Every Intervention Count
Access - Make it easier to know about services and support.	
How we work - Find solutions that work for children and families in times of reducing resource.	
Education: - Achieve a good education for all children and be the best you can be	Key Focus for MEIC Programme
Skills - Improve the economic wellbeing of young people and young adults and reduce intergenerational worklessness	

What didn't work with the previous strategy; the 'gap analysis', and the reasoning / evidence supporting the current strategy?

The current operating model for CYPs was introduced in 2011. A detailed evaluation of this was undertaken in early 2013. Some summary findings:

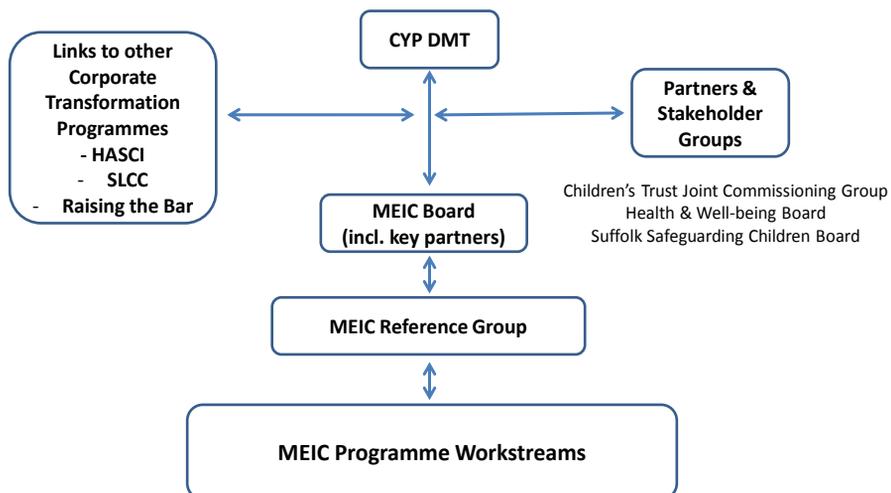
Areas of Progress:

- Overall there is strong support for the basic model and its underpinning principles
- Universal support for the function of the Access Team but insufficient capacity in light of rising demand
- Integrated Teams / CAF has provided a clear route for providing support for families not 'in need'
- Integration of Community Health into C&YP Service, although 'transferred but not transformed'.
- Reduced number of children 'in need', subject to a Child Protection Plan and looked after
- Small reductions in Social Worker caseloads although these remain higher than the levels intended

Areas for Further Development:

- A need to identify a core Suffolk intervention model including a consistent means of tracking progress
- Workflow inefficiencies with many Initial Assessments resulting in no 'child in need' outcome
- Cultural change required still remains to be fully realised
- Over emphasis on task and process at expense of a focus on planned interventions delivering outcomes
- Inconsistent 'Step up/Step down' processes between integrated and specialist teams
- Staff instability in Social Care teams a critical factor affecting capacity to deliver effective interventions
- Inconsistent Management oversight to ensure a higher standard for professional practice in basic areas
- Senior Practitioners in Specialist Teams not able fulfil key functions of their newly defined role
- Impact of staff travel and disproportionate amount of time spent on case recording systems
- Significant gap in tools & resources to analyse information from a range of case management systems
- Issues with varying locality boundaries

What is the governance framework and the structure of the senior management team?



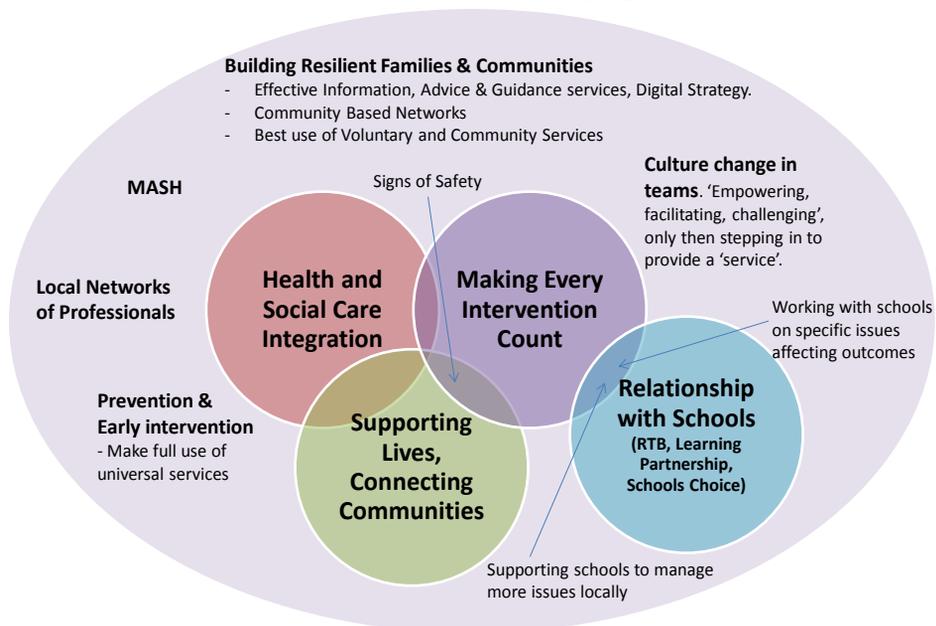
What numbers of different types of staff are envisaged?

The Making Every Intervention Count programme will have some impact on all CYP staff, although some teams are out of direct scope of the programme. 1750 FTEs will be in scope of change, of a total of 2100 FTEs in CYP.

- 200 FTE Social Workers
- 50 FTE Senior Practitioners
- 200 FTE Family Support Practitioners
- 115 FTE Health Visitors
- 100 FTE Youth Support Workers
- 70 FTE Nurses (School nurses, Community Staff Nurses, specialist nurses)
- 50 FTE Residential Childcare Workers
- 50 FTE Support & Information Officers (Children's Centres)

- 380 FTE Business Support Staff
- 180 FTE Managers & Team Leaders (Practice Managers, Corporate Parenting, Children's Centres)
- 110 FTE Advisers / Technical Staff (Early Years, Community Development, Workforce Development, Education Psychologists, Advisory Teachers)

How the various initiatives and transformation programmes inter-relate?



What are the key outcomes and how are they, or how will they be, measured?

Measures of success will include a mix of:

- Outcome Measures
- Process Measures
- Comparators with statistical neighbours and neighbouring authorities
- Progress against defined targets
- Performance measures to identify progress of staff and teams towards new ways of working

Identifying key common measure with partners is envisaged to be important

Some detail is included in the report

What is the implementation timeline: key milestones?

Date	Milestone
Sep 13	Programme Development and Launch
Sep 13 - Mar 14	Review & Implement specific savings projects to meet 2014/15 (and further) budget savings targets
Sep 13 - Mar 14	Quality of Practice Programme for social care services
Sep 13 – Jun 14	Engagement phase with Staff, Partners & Unions; feedback and ideas about potential new ways of working
Feb 2014 onwards	Signs of Safety training and implementation
Jul 2014 onwards	Implementation of Multi – Agency Safeguarding Hub
Jul 14 – Sep 14	Service Design Phase (ASE Events, Workshops, Proposals for Service Areas)
Nov 14 – Dec 14	Formal consultation with CYP staff
Jan 15 – Apr 15	Implementation Phase (Selection, Planning, Dismissal, New working practices)
Summer 15	MEIC Operating Model in place
Summer 15 onwards	Embedding new ways of working and implementing incremental change to meet savings targets up to 2017/18

Key risks and issues?

Risk & Consequences	Mitigations
<ul style="list-style-type: none"> Capacity and capability of CYP resources to deliver the programme in a timely way 	<ul style="list-style-type: none"> Priority of focus on MEIC alongside operations Individuals held to account
<ul style="list-style-type: none"> Failure to plan to effectively manage demand down and achieve effective workflow within and across services will mean reduced resources become bogged down causing service delivery to underperform 	<ul style="list-style-type: none"> Helping families & communities to help themselves Effective MASH implementation Single joined up, owned SMART plans Purposeful work underpinned by Signs of Safety Reduce number of open cases Effective early intervention
<ul style="list-style-type: none"> CYP, other SCC directorates and partners fail to identify effective new ways of working to make best use of joint resources 	<ul style="list-style-type: none"> Joint commissioning Specific engagement with partners Alignment between MEIC, HASCI, SLCC
<ul style="list-style-type: none"> Signs of Safety approach is not fully embedded so that the benefits not fully realised 	<ul style="list-style-type: none"> Sufficient time to follow-through in practice Model approach from top down
<ul style="list-style-type: none"> Failure to recruit / retain the right skills and experience as staff numbers are reduced meaning that practice changes are not driven through and sustained. 	<ul style="list-style-type: none"> HR options Understand skills, culture needed for the future Good Practice Managers are key
<ul style="list-style-type: none"> Pressures on 14/15 budget means additional savings challenge for MEIC 2015/16 to 2017/18 	<ul style="list-style-type: none"> Budget Management and contingency planning within 2014/15

How have any issues been addressed raised from external reviews including Ofsted inspections?

- Ofsted Inspection of Child Protection arrangements in June 2013. Service judged to be 'Adequate'. A number of areas where improvement directed remain challenging

Areas for Improvement	Making Every Intervention Count
Social worker's caseloads to be maintained at level of agreed guidelines in Suffolk.	Multi-Agency Teams combining Early Help & Specialist Services to support managing caseloads
Recruitment of qualified staff must be accelerated.	Recruiting experienced social workers remains a challenge nationally. Vast majority of appointments are Newly Qualified Social Workers. By necessity a number of locums (costly). Implemented pay progression scheme for Social Workers
QA systems and performance management must be used to ensure effective front line practice.	Implementing Signs of Safety Programme Proposed Central Business Intelligence Hub Retain QA & Professional Development Team Strengthened Audit Framework
Children's plans must be specific, measurable and regularly reviewed	Quality of Practice Programme A key focus for supervision and operational management audits

What consultation has been undertaken with young people, parents, carers, staff or partners?

Young People, Parents & Carers

- Collation and analysis of the large amount of feedback already gathered by CYP about services received to feed into proposals for the future.
- Work with Suffolk Assembly of Youth

Staff

- 5 staff engagement workshops with a wide cross section of practitioners, practice managers, service managers and senior managers.
- Structured team discussions with feedback via Survey Monkey to ensure all staff have the opportunity to get involved.

Partners

- An initial Partner Conference in March 2014
- Accelerated Solutions Environment Events jointly led by CYP and partners in July 2014 & Sept 2014 for 70+ public sector leaders.
- Engagement with a range of partnership governance bodies: Children's Trust Joint Strategic Commissioning Group, Suffolk's Local Safeguarding Children's Board, Suffolk Congress, Health & Wellbeing Board.

What strategic focus is there on mental health early intervention?

- **Improving access to psychological therapies for children, young people and families (CYP IAPT)**
 - Multi-Agency Steering Group to plan and co-ordinate integrated service development
 - Develop links between SCC educational psychologists and NSFT (and other specialist) provision
 - Greater integration of Tier 2 PMHW service with SCC CYPS – “Resilience Hub”, East & West Suffolk
 - Integrated pathway development for access and provision of support and interventions across Tiers 1- 3
- **Early Intervention for Hidden Harm (Parental substance misuse, domestic abuse and poor parental mental health)**
 - Multi agency Hidden Harm Steering Group
 - County Domestic Abuse Forum
 - Review of ACCORD Protocol

Above are linked strategic forums and development to promote early identification, response and co-ordination of services to reduce the harm to children and young people experiencing Hidden Harm. This includes raising awareness in the public and workforce, workforce development, service development and commissioning.
- **Development of Connect Mental Health Services for LAC**
 - Establish pathway of assessment for adults / children requiring mental health reports for care proceedings.